

**Calendar No. 238**

110TH CONGRESS }  
*1st Session* }

SENATE

{ REPORT  
110-107

DEPARTMENTS OF LABOR, HEALTH AND  
HUMAN SERVICES, AND EDUCATION, AND  
RELATED AGENCIES APPROPRIATION BILL,  
2008

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R E P O R T

OF THE

COMMITTEE ON APPROPRIATIONS  
U.S. SENATE

ON

S. 1710



JUNE 27, 2007.—Ordered to be printed

**Departments of Labor, Health and Human Services, and Education, and Related Agencies  
Appropriation Bill, 2008 (S. 1710)**

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### DEPARTMENTS OF LABOR, HEALTH AND HUMAN SERVICES, AND EDUCATION, AND RELATED AGENCIES APPROPRIATION BILL, 2008

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JUNE 27, 2007.—Ordered to be printed  
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Mr. HARKIN, from the Committee on Appropriations,  
submitted the following

### REPORT

[To accompany S. 1710]

The Committee on Appropriations reports the bill (S. 1710) making appropriations for Departments of Labor, Health and Human Services, and Education and related agencies for the fiscal year ending September 30, 2008, and for other purposes, reports favorably thereon and recommends that the bill do pass.

#### *Amount of budget authority*

Total of bill as reported to the Senate .....	\$605,536,474,000
Amount of 2007 appropriations .....	545,857,321,000
Amount of 2008 budget estimate .....	596,378,249,000
Bill as recommended to Senate compared to—	
2007 appropriations .....	+ 59,679,153,000
2008 budget estimate .....	+ 9,158,225,000

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## SUMMARY OF BUDGET ESTIMATES AND COMMITTEE RECOMMENDATIONS

For fiscal year 2008, the Committee recommends total budget authority of \$605,536,474,000 for the Departments of Labor, Health and Human Services, and Education, and Related Agencies. Of this amount, \$149,872,000,000 is current year discretionary funding, including offsets.

### OVERVIEW AND BILL HIGHLIGHTS

The Labor, HHS, and Education and Related Agencies bill constitutes the largest of the non-defense Federal appropriations bills being considered by Congress this year. It is the product of extensive deliberations, driven by the realization that no task before Congress is more important than safeguarding and improving the health and well-being of all Americans. This bill is made up of over 300 programs, spanning three Federal Departments and numerous related agencies. But the bill is more than its component parts. Virtually every element of this bill reflects the traditional ideal of democracy: that every citizen deserves the right to a basic education and job skills training; protection from illness and want; and an equal opportunity to reach one's highest potential.

This bill at the same time provides a safety net of social protections for the needy while stimulating advances in human achievement and the life sciences. At its core, this bill embodies those defining principles by which any free society must be guided: compassion for the less fortunate; respect for family and loved ones; acceptance of personal responsibility for one's actions; character development; and the avoidance of destructive behavior.

### HIGHLIGHTS OF THE BILL

*Job Training.*—The Committee recommendation includes \$5,247,010,000 for job training programs. This includes \$1,659,872,000 for the Office of Job Corps, an increase of \$53,595,000 over the 2007 level and \$109,500,000 more than the request. The Committee rejected the administration's proposal to cancel \$335,000,000 in job training funds currently available for training purposes.

*Worker Protection.*—The Committee bill provides \$828,473,000 to ensure the health and safety of workers, including \$498,445,000 for the Occupational Safety and Health Administration and \$330,028,000 for the Mine Safety and Health Administration. This total is \$40,335,000 more than the 2007 level and \$24,718,000 more than the budget request.

*Child Labor.*—The Committee bill includes \$82,516,000 for activities designed to end abusive child labor. This is \$10,000,000 above the 2007 level.

*National Institutes of Health.*—A total of \$29,899,887,000 is recommended to fund biomedical research at the 27 Institutes and Centers that comprise the NIH. This represents an increase of \$1,000,000,000 over the fiscal year 2007 level and \$1,278,646,000 over the budget request.

*Health Centers.*—The recommendation includes \$2,238,039,000 for health centers, \$250,000,000 over the fiscal 2007 level.

*Nursing Education.*—The Committee recommends \$169,679,000 for nursing education, \$20,000,000 over the fiscal year 2007 level.

*Autism.*—The Committee bill includes \$53,500,000 for prevention of and support for families affected by autism and other related developmental disorders. This is an increase of \$18,500,000 over last year's appropriation.

*Centers for Disease Control and Prevention.*—A total of \$6,426,833,000 is provided in this bill for the Centers for Disease Control and Prevention. This is an increase of \$224,161,000 over the fiscal year 2007 level. This level does not include funding for the influenza pandemic, which is appropriated in the HHS Office of the Secretary.

*Substance Abuse.*—The Committee bill provides \$3,404,798,000 for substance abuse prevention and treatment programs. Included in this amount is \$2,185,159,000 for substance abuse treatment, \$197,108,000 for substance abuse prevention and \$923,812,000 for mental health programs.

*Pandemic Influenza.*—The Committee recommendation includes \$888,000,000 to prepare for and respond to an influenza pandemic. Funds are available for the development and purchase of vaccine, antivirals, necessary medical supplies, diagnostics, and other surveillance tools.

*Head Start.*—The Committee bill includes \$7,088,571,000 for the Head Start Program. This represents an increase of \$200,000,000 over the 2007 comparable level.

*Persons With Disabilities.*—The Committee recommendation includes \$228,548,000 to promote independent living in home and community-based settings. This includes \$27,712,000 for the Office of Disability Employment Policy at the Department of Labor and \$190,836,000 for programs funded under the Help America Vote Act and the Developmental Disabilities Assistance and Bill of Rights Act. It also includes \$10,000,000 for Real Choice Systems Change Grants through the Center for Medicaid and Medicare Services.

*Title I (Education).*—The Committee has provided \$13,909,900,000 for title I grants to LEAs, an increase of \$1,071,775,000 over the fiscal year 2007 appropriation, and \$500,000,000 for school improvement grants, an increase of \$375,000,000 over the fiscal year 2007 level.

*Student Financial Aid.*—The Committee recommends \$16,368,883,000 for student financial assistance. The Pell Grant Program continues its current maximum grant award of \$4,310.

*Higher Education Initiatives.*—The Committee bill provides \$2,028,302,000 for initiatives to provide greater opportunities for higher education, including \$858,178,000 for Federal TRIO programs, an increase of \$30,000,000, and \$313,423,000 for GEAR UP, an increase of \$10,000,000.

*Education for Individuals With Disabilities.*—The Committee bill provides \$12,330,374,000 to help ensure that all children have access to a free and appropriate education. This amount includes \$11,240,000,000 for Part B grants to States, an increase of \$457,039,000 over last year and \$748,059,000 more than the budget request. The recommended level will reverse the declining share of Federal resources for educating students with disabilities and raise it to 17.65 percent, the same amount as it was in 2006.

*Rehabilitation Services.*—The bill recommends \$3,286,942,000 for rehabilitation services. These funds are essential for families with disabilities seeking employment. The Committee restored funding for several important programs proposed for elimination, such as Supported Employment State Grants, Projects with Industry, Recreational programs and programs for migrant and seasonal farmworkers and rejected the Department's proposal to freeze State grant funding at the 2007 level.

*Services for Older Americans.*—For programs serving older Americans, the Committee recommendation includes \$3,298,628,000. This recommendation includes \$217,586,000 for senior volunteer programs, \$483,611,000 for community service employment for older Americans, \$350,595,000 for supportive services and centers, \$162,595,000 for family caregiver support programs and \$773,570,000 for senior nutrition programs. For the medical research activities of the National Institute on Aging, the Committee recommends \$1,073,048,000. The Committee recommendation also includes not less than \$35,000,000 for the Medicare insurance counseling program.

*Corporation for Public Broadcasting.*—The Committee bill recommends an advance appropriation for fiscal year 2010 of \$420,000,000 for the Corporation for Public Broadcasting. In addition, the Committee bill includes \$29,700,000 for conversion to digital broadcasting and \$26,750,000 for the replacement project of the interconnection system in fiscal year 2008 funding.

#### TRANSPARENCY IN CONGRESSIONAL DIRECTIVES

On January 18, 2007, the Senate passed S. 1, The Legislative Transparency and Accountability Act of 2007, by a vote of 96–2. While the Committee awaits final action on this legislation, the chairman and ranking member of the Committee issued interim requirements to ensure that the goals of S. 1 are in place for the appropriations bills for fiscal year 2008.

The Constitution vests in the Congress the power of the purse. The Committee believes strongly that Congress should make the decisions on how to allocate the people's money. In order to improve transparency and accountability in the process of approving earmarks (as defined in S. 1) in appropriations measures, each Committee report includes, for each earmark:

- (1) the name of the Member(s) making the request, and where appropriate, the President;
- (2) the name and location of the intended recipient or, if there is no specifically intended recipient, the intended location of the activity; and
- (3) the purpose of such earmark.

The term “congressional earmark” means a provision or report language included primarily at the request of a Senator, providing, authorizing, or recommending a specific amount of discretionary budget authority, credit authority, or other spending authority for a contract, loan, loan guarantee, grant, loan authority, or other expenditure with or to an entity, or targeted to a specific state, locality or congressional district, other than through a statutory or administrative, formula-driven, or competitive award process.

For each earmark, a Member is required to provide a certification that neither the Member (nor his or her spouse) has a pecuniary interest in such earmark, consistent with Senate Rule XXXVII(4). Such certifications are available to the public at <http://appropriations.senate.gov/senators.cfm> or go to [appropriations.senate.gov](http://appropriations.senate.gov) and click on “Members”.

In addition the Committee has significantly reduced the number and amount of earmarks included in the fiscal year 2008 bill as compared to fiscal year 2005.

The Committee has instituted these reforms to ensure that there is accountability in how it executes its constitutional authority to spend Federal dollars. The executive branch must do the same. The Committee notes, for example, that the Department of Health and Human Services awarded almost \$2,000,000,000 in contracts not subject to full and open competition in 2006. In addition, a recent Congressional Research Service report found that 90 percent of the funds under the Department of Labor’s High Growth Job Training Initiative were awarded non-competitively, resulting in more than \$250,000,000 being awarded over the past 5 years without any competition or public oversight. Therefore, the Committee has included a general provision in title V requiring the Departments of Labor, Health and Human Services, and Education to provide a quarterly report to the Committee listing all contracts, grants, and cooperative agreements awarded by the Department over the past 90 days for amounts over \$100,000 that were not awarded competitively.

#### INITIATIVES

##### *Improving the Implementation of NCLB*

The No Child Left Behind Act includes dozens of authorized funding programs. But when people talk about the need to adequately fund the law, they’re usually thinking of title I grants to local educational agencies. And rightly so. The largest and most important of the Federal education programs, title I grants to LEAs help the students who need help the most—the millions who are being left behind. It is also the program that, under the NCLB, holds schools accountable for improving student performance. That is why, when Congress wrote the NCLB, it authorized specific funding levels for title I for each year through fiscal year 2007.

Regrettably, the Federal Government fell short of its commitment on title I each year, and each year the gap between the authorized and appropriated levels grew wider, reaching a cumulative total of \$54,700,000,000, while the accountability requirements on schools grew more and more demanding.

For fiscal year 2008, the Committee attempts to reverse this trend by recommending the largest increase for title I in 5 years—\$1,071,775,000. The administration called for the same increase, but offset the additional funds by proposing to terminate dozens of other programs, including career and technical education State grants, education technology State grants, arts in education, and school counseling; the Committee recommendation achieves its title I increase while preserving most of the targeted programs.

Increasing funding for title I grants to LEAs is not the only way that Federal appropriations can be used to improve the implementation of the No Child Left Behind Act, however. Particularly in the areas of research and technical assistance, it's far more efficient and effective for the Federal Government to provide key education services than expecting States and localities to reinvent the wheel many times over. Therefore, the Committee has made it a top priority to identify those pots of money that will help schools meet their NCLB accountability requirements, and increase their funding to the extent possible.

*School Improvement Grants.*—More than 10,000 schools are currently designated in need of improvement, meaning they failed to meet NCLB accountability standards for 2 years in a row. The school improvement grants program targets title I funding directly to such schools, with the goal of turning them around. Congress funded this program for the first time in the fiscal year 2007 joint funding resolution, at a level of \$125,000,000. For fiscal year 2008, the Committee recommends an increase to \$500,000,000.

*Enhanced Assessment Instruments.*—Accurate assessments are key to measuring student achievement. But concerns have been raised about the quality of those currently in use. The Committee recommends \$16,000,000—more than double the fiscal year 2007 appropriation of \$7,563,000—for competitive grants to develop enhanced assessment instruments. The Committee intends the Department to put a priority on assessments for students with disabilities and students with limited English proficiency—two groups for which high-quality assessments have been particularly problematic to develop.

*Comprehensive Centers.*—These 21 centers, spread out geographically across the country, are charged with advising States how to implement NCLB and meet the law's accountability goals. Some, for example, help States develop ways to provide professional development, track student achievement data, and offer assistance to schools that have been designated in need of improvement. The Committee recommends increasing funding for this program from \$56,257,000 to \$60,000,000.

*Research, Development and Dissemination.*—This program supports investments in research intended to generate solutions to critical problems in education. The Committee notes that one of the bipartisan recommendations of the Commission on No Child Left Behind is to double the research budget at IES and target the increase to research that assists schools in meeting the goals of NCLB. The Committee recommends increasing funding for this purpose from \$162,552,000 to \$182,552,000.

*Regional Educational Laboratories.*—Program funds support a network of 10 laboratories that are responsible for promoting the

use of broad-based systemic strategies to improve student achievement. The Committee recommends increasing funding for this program from \$65,470,000 to \$68,000,000 to increase their capacity to provide timely responses to requests for assistance on issues of urgent regional need.

*Statewide Data Systems.*—This program supports competitive grants to State educational agencies to enable them to design, develop, and implement statewide, longitudinal data systems for managing, analyzing, disaggregating, and using individual student data. The Committee notes that one of the bipartisan recommendations of the Commission on No Child Left Behind is to assist States with the development, implementation and ongoing support of sufficient data systems, by increasing the budget for this program by an additional \$100,000,000 for each of the next 4 years. Funding provided to date has assisted 14 States, with another 17 expected to be funded this year. The Committee recommends increasing funding for this program from \$24,552,000 to \$58,000,000, to enable more States to develop and strengthen their data systems.

*Elimination of Fraud, Waste, and Abuse*

For fiscal year 2008, the Committee has increased funding for a variety of activities aimed at reducing fraud, waste, and abuse of taxpayer dollars. These program integrity initiatives have been shown to be a wise investment of Federal dollars resulting in billions of dollars of savings from Federal entitlement programs—unemployment insurance, Medicare and Medicaid, and Social Security.

*Unemployment Insurance Program Integrity.*—The Committee recommendation includes \$50,000,000, an increase of \$40,000,000, to conduct eligibility reviews of claimants of Unemployment Insurance. This increase will save an estimated \$200,000,000 annually in inappropriate Unemployment Insurance payments.

*Social Security Program Integrity.*—The Committee recommendation includes \$476,970,000 for conducting continuing disability reviews [CDRs] and redeterminations of eligibility for Social Security Disability and Supplemental Security Income benefits. CDRs save \$10 in benefit payments for every \$1 spent to conduct these activities, while redeterminations save \$7 in payments for every \$1 for doing this work.

*TANF Improper Payments.*—The Committee recommendation includes an increase of \$6,200,000 for the Administration for Children and Families [ACF] to establish error rates for the temporary assistance to needy families [TANF] and child care programs. Efforts to minimize improper payments in these programs are particularly important given that they total over \$34,000,000,000 in Federal and State funds annually. Previous ACF program integrity efforts have achieved over \$600,000,000 in savings in the Head Start and foster care programs.

*Health Care Program Integrity.*—In fiscal year 2006, Medicare and Medicaid outlays accounted for nearly \$1 out of every \$5 of the total Federal outlays. Fraud committed against Federal health care programs puts Americans at increased risk and diverts critical resources from providing necessary health services to some of the Nation's most vulnerable populations.

The Committee has included \$383,000,000 for Health Care Fraud and Abuse Control activities at the Center for Medicare and Medicaid Services. This is \$200,000,000 more than requested by the administration.

Investment in health care program integrity more than pays for itself based on 10 years of documented recoveries to the Medicare Part A Trust Fund. In fiscal year 2006 the Medicare Integrity Program [MIP] reported savings of more than \$10,000,000,000. This computes to a 14:1 overall return on investment from MIP oversight activities. The overall return on investment has been consistent since the inception of MIP with special projects and initiatives achieving even higher returns.

#### REPROGRAMMING AND TRANSFER AUTHORITY

The Committee has included bill language delineating permissible transfer authority in general provisions for each of the Departments of Labor, Health and Human Services, and Education, as well as specifying reprogramming authority in a general provision applying to all funds provided under this act.

TITLE I  
DEPARTMENT OF LABOR  
EMPLOYMENT AND TRAINING ADMINISTRATION  
TRAINING AND EMPLOYMENT SERVICES

Appropriations, 2007 .....	\$3,556,272,000
Budget estimate, 2008 .....	2,972,039,000
Committee recommendation .....	3,587,138,000

The Committee recommends \$3,587,138,000 for this account in 2008 which provides funding primarily for activities under the Workforce Investment Act [WIA]. The comparable 2007 level is \$3,556,272,000 and the administration request is \$2,972,039,000. The Committee recommendation rejects the proposed \$335,000,000 cancellation of unexpended balances proposed in the budget request.

Training and employment services is comprised of programs designed to enhance the employment and earnings of economically disadvantaged and dislocated workers, operated through a decentralized system of skill training and related services. This appropriation is generally forward-funded on a July-to-June cycle. Funds provided for fiscal year 2008 will support the program from July 1, 2008 through June 30, 2009. A portion of this account's funding, \$1,772,000,000, is advance appropriated, yet still available for the forward-funded program year.

The Committee expects that, while the Workforce Investment Act, Wagner-Peyser Act, and Trade Adjustment Act are in the process of being altered and renewed, the administration will refrain from unilateral changes to the administration, operation and financing of employment and training programs. Therefore, legislative language is included in section 107 of the general provisions that prohibits the Department from taking such action while Congress considers legislation reauthorizing these acts.

Pending reauthorization of the Workforce Investment Act the Committee is acting on a current law request, deferring without prejudice proposed legislative language under the jurisdiction of the authorizing committees. The Committee recommendation includes language in section 108 of the general provisions requiring that the Department take no action to amend, through regulatory or other administrative action, the definition established in 20 CFR 677.220 for functions and activities under title I of the Workforce Investment Act until such time as legislation reauthorizing the act is enacted. This language is continued from last year's bill.

The Committee notes that the number of unemployed workers has increased by 842,000, while the number of manufacturing jobs has decreased by 3 million since 2001. Despite these trends, the Department of Labor has consistently proposed cutting funding

available for job training. The Committee once again rejects these proposed cuts.

While the Committee is interested in ensuring that more training is accomplished with the funds available—a stated concern of the Department as well—the Committee disagrees with the proposed solutions of the Department. These can be stated simply as funding cuts and consolidation of programs. The Committee believes these policy solutions are not the right ones to move American workers forward in this competitive global marketplace.

#### *Grants to States*

The Committee recommendation includes \$2,994,510,000 for Training and Employment Services Grants to States, the same as the fiscal year 2007 comparable amount. The budget request includes \$2,455,439,000 for this purpose. In addition, the budget proposes to cancel \$335,000,000 of job training funds currently available to the workforce development system. The Committee rejects this proposal and notes that the Government Accountability Office has analyzed spending of the workforce development system and found that these funds generally are being spent within authorized timeframes. For example, the GAO found that 44 States spent 90 percent or more of their program year 2000 allotment within 2 years, even though 3 years is the amount of time they have to spend these funds.

The budget request also proposes legislative language to increase the amount of funds that a local workforce board may transfer between the adult and dislocated worker assistance program from the 30 percent under current law to 40 percent, with the approval of the Governor. The Committee bill does not provide the recommended increase to 40 percent and the Committee notes that many States report that no funds have been transferred under this authority while other States have received waivers from the Department to transfer 100 percent of such funds.

The budget request also includes language allowing the Secretary to reallocate funds available under the Adult, Youth and Dislocated Worker programs if the total amount of unexpended balances in a State exceeds 30 percent during program year 2006. These funds would be reallocated using program year 2007 funds to States that have unexpended balances lower than 30 percent. The Committee recommendation does not include the requested language and notes that this issue is most appropriately addressed during the reauthorization of the Workforce Investment Act.

*Adult Employment and Training.*—For Adult Employment and Training Activities, the Committee recommends \$864,199,000. The comparable fiscal year 2007 level is \$864,199,000 and the budget request includes \$712,000,000 for this purpose. This program is formula-funded to States and further distributed to local workforce investment boards. Services for adults will be provided through the One-Stop system and most customers receiving training will use their individual training accounts to determine which programs and providers fit their needs. The act authorizes core services, which will be available to all adults with no eligibility requirements, and intensive services, for unemployed individuals who are not able to find jobs through core services alone.

Funds made available in this bill support program year 2008 activities, which occur from July 1, 2008 through June 30, 2009. The bill provides that \$152,199,000 is available for obligation on July 1, 2008, and that \$712,000,000 is available on October 1, 2008. Both categories of funding are available for obligation through June 30, 2009.

*Youth Training.*—For Youth Training, the Committee recommends \$940,500,000. The comparable fiscal year 2007 level is \$940,500,000 and the budget request includes \$840,500,000 for this purpose. The purpose of Youth Training is to provide eligible youth with assistance in achieving academic and employment success through improving educational and skill competencies and providing connections to employers. Other activities supported include mentoring, training, supportive services, and summer employment directly linked to academic and occupational learning, incentives for recognition and achievement, and activities related to leadership development, citizenship, and community service.

Funds made available in this bill support program year 2008 activities, which occur from April 1, 2008 through June 30, 2009. The bill provides that \$940,500,000 is available for obligation on April 1, 2008 and available for obligation through June 30, 2009.

*Dislocated Worker Assistance.*—For Dislocated Worker Assistance, the Committee recommends \$1,189,811,000. The comparable fiscal year 2007 level is \$1,189,811,000 and the budget request includes \$902,939,000 for this purpose. This program is a State-operated effort which provides core and intensive services, training, and support to help permanently separated workers return to productive, unsubsidized employment. In addition, States use these funds for rapid response assistance to help workers affected by mass layoffs and plant closures. Also, States may use these funds to carry out additional statewide employment and training activities, which may include implementation of innovative incumbent and dislocated worker training, and programs such as Advanced Manufacturing Integrated Systems Technology.

Funds made available in this bill support program year 2008 activities, which occur from July 1, 2008 through June 30, 2009. The bill provides that \$341,811,000 is available for obligation on July 1, 2008, and that \$848,000,000 is available on October 1, 2008. Both categories of funding are available for obligation through June 30, 2009.

#### *Federally Administered Programs*

*Dislocated Worker Assistance National Reserve.*—The Committee recommends \$282,092,000 for the Dislocated Worker National Reserve, which is available to the Secretary for activities such as responding to mass layoffs, plant and/or military base closings, and natural disasters across the country, which cannot be otherwise anticipated, as well as technical assistance and training and demonstration projects, including a community college initiative.

Funds made available in this bill support program year 2008 activities, which occur from July 1, 2008 through June 30, 2009. The bill provides that \$66,392,000 is available for obligation on July 1, 2008, and that \$212,000,000 is available on October 1, 2008. Both

categories of funding are available for obligation through June 30, 2009.

The bill also provides that \$3,700,000 of the funds available from the National Reserve are available on October 1, 2007 for non-competitive grants made within 30 days of the date of enactment of this act. The Department shall make non-competitive grants of \$1,500,000 to the AFL-CIO Working for America Institute (Funding for this grant was requested by Senator Harkin) and \$2,200,000 to the AFL Appalachian Council, Incorporated (Funding for this grant was requested by Senator Specter).

The Committee bill continues language authorizing the use of funds under the dislocated workers program for projects that provide assistance to new entrants in the workforce and incumbent workers, as well as to provide assistance where there have been dislocations across multiple sectors or local areas of a State.

The Committee is aware of the economic diversification opportunity brought on by the recent closures of U.S. pineapple plantations and encourages the Department to consider possible collaborations between State and statewide agricultural organizations that sponsor multi-culturally sensitive on-farm food safety training to mitigate worker dislocation.

*Community-Based Job Training Initiative.*—Within the Committee recommendation for the Dislocated Worker Assistance National Reserve, \$125,000,000 is available to continue the Community College/Community-Based Job Training Grant initiative. The comparable fiscal year 2007 level is \$125,000,000 and the budget request includes \$150,000,000 for this purpose. Funds used for this initiative should strengthen partnerships between workforce investment boards, community colleges, and employers, to train workers for high growth, high demand industries in the new economy. The Committee recommendation includes a general provision requiring these grants to be awarded competitively.

The Committee notes the lack of baselines and performance information on training outcomes achieved under this program. The Committee requests that the Department include in its fiscal year 2009 budget justification a thorough analysis of available grantee reporting on training outcomes and a description of how the Department intends to evaluate the effectiveness of this new program.

*Native American Programs.*—For Native American programs, the Committee recommends \$53,696,000. The comparable fiscal year 2007 level is \$53,696,000 and the budget request includes \$45,000,000 for this purpose. This program is designed to improve the economic well-being of Native Americans (Indians, Eskimos, Aleuts, and Native Hawaiians) through the provision of training, work experience, and other employment-related services and opportunities that are intended to aid the participants to secure permanent, unsubsidized jobs.

*Migrant and Seasonal Farmworker Programs.*—For Migrant and Seasonal Farmworkers, the Committee recommends \$79,752,000. The comparable fiscal year 2007 level is \$79,752,000, while the budget proposes to eliminate funding for this purpose. Authorized by the Workforce Investment Act, this program is designed to serve members of economically disadvantaged families whose principal livelihood is derived from migratory and other forms of seasonal

farmwork, or fishing, or logging activities. Enrollees and their families are provided with employment training and related services intended to prepare them for stable, year-round employment within and outside of the agriculture industry.

The Committee recommendation provides that \$74,302,000 be used for State service area grants. The Committee recommendation also includes bill language directing that \$4,950,000 be used for migrant and seasonal farmworker housing grants, of which not less than 70 percent shall be for permanent housing. The principal purpose of these funds is to continue the network of local farmworker housing organizations working on permanent housing solutions for migrant and seasonal farmworkers. The Committee recommendation also includes \$500,000 to be used for section 167 training, technical assistance and related activities, including funds for migrant rest center activities. Finally, the Committee wishes to again advise the Department regarding the requirements of the Workforce Investment Act in selecting an eligible entity to receive a State service area grant under section 167. Such an entity must have already demonstrated a capacity to administer effectively a diversified program of workforce training and related assistance for eligible migrant and seasonal farmworkers.

*Women in Apprenticeship.*—The Committee recommends \$1,000,000 for program year 2008 activities as authorized under the Women in Apprenticeship and Non-Traditional Occupations Act of 1992. The comparable fiscal year 2007 level is \$1,000,000, while the budget proposes to eliminate funding for this purpose. These funds provide for technical assistance to employers and unions to assist them in training, placing, and retraining women in nontraditional jobs and occupations.

*YouthBuild.*—The Committee recommends \$65,000,000 for the YouthBuild program. The comparable fiscal year 2007 level is \$49,500,000 and the budget request includes \$50,000,000 for this purpose.

The YouthBuild program provides the opportunity for eligible youth to learn construction trade skills by building or rehabilitating housing for low-income individuals, earn a high school diploma or equivalency degree, and prepare for postsecondary training. Personal counseling and training in life skills and financial management also are provided. The students are a part of a mini-community of adults and youth committed to each other's success and to improving the conditions in their neighborhoods.

The Committee notes that 68,000 YouthBuild students have built or rehabilitated 16,000 units of affordable housing since 1994. Construction projects range from constructing new homes to restoring multi-unit buildings to rebuilding entire neighborhoods.

*Job Corps.*—The Committee recommendation continues funding the Job Corps program as an independent entity reporting to the Office of the Secretary of Labor. The budget request proposed returning the program to the Employment and Training Administration. This program is described in a separate account in this report.

#### *National Activities*

*Pilots, Demonstrations, and Research.*—The Committee recommends \$30,650,000 for pilots, demonstration and research au-

thorized by section 171 of the Workforce Investment Act. The comparable fiscal year 2007 level is \$14,700,000 and the budget request includes \$13,000,000 for this purpose. These funds support grants or contracts to conduct research, pilots or demonstrations that improve techniques or demonstrate the effectiveness of programs.

The Committee encourages the Department to re-assess the performance measures currently in use for pilots, demonstrations, evaluation and research. The ones currently utilized are process goals that don't address how such funds are used to improve the effectiveness of Department programs. The Committee bill also includes language under section 105 of the general provisions that requires the Department to submit an operating plan by July 1, 2008 which details the planned expenditure of these funds.

The Committee recommendation also includes language requiring that funds be provided to the following organizations in the amounts specified:

Project	Committee recommendation	Requested by
Alu Like, Inc., Honolulu, HI, for training and education .....	\$100,000	Inouye
Arc of Blackstone Valley, Pawtucket, RI, to recruit individuals to work as direct support professionals in the human services.	325,000	Reed
Baltimore Department of Planning, Baltimore, MD, to support the expansion of workforce development resources.	500,000	Cardin
Barnabus Uplift, Des Moines, Iowa, for job training and supportive services .....	500,000	Harkin
Bismarck State College, Bismarck, ND, for the energy training program .....	1,000,000	Dorgan, Conrad
Brockton Area Private Industry Council, Inc., Brockton, MA, for workforce development programs.	200,000	Kennedy, Kerry
Capps Workforce Training Center, Moorhead, MS, for Workforce Training .....	500,000	Cochran
Catholic Charities, Chicago, IL, for vocational training and support programs at the Saint Leo Residence for Veterans.	550,000	Durbin
Community Agricultural Vocational Institute, Yakima, WA, for training of agricultural workers.	250,000	Murray
Community College of Allegheny College, Pittsburgh, PA, for job training programs.	75,000	Specter
Community Solution for Clackamas County, Oregon City, Oregon, to expand the Working for Independence (WFI) program.	150,000	Smith
Community Transportation Association of America, Washington, DC, for the Joblinks program for continuation costs.	500,000	Harkin
Cook Inlet Tribal Council, Inc., Anchorage, AK, for the Alaska's People program to provide job training and employment counseling.	500,000	Stevens
Crowder College, Neosho, MO, to expand technical education programs for workforce development.	775,000	Bond
Des Moines Area Community College, Des Moines, Iowa, for Project Employment.	250,000	Harkin, Grassley
Eastern Michigan University, Ypsilanti, MI, for retraining of displaced workers	400,000	Stabenow, Levin
Eastern Technology Council, Wayne, PA, for job training programs .....	75,000	Specter, Casey
Fort Lewis College, Durango, CO, for the development of entrepreneurship programs to enhance regional development.	150,000	Allard, Salazar
Foundation for an Independent Tomorrow, Las Vegas, NV, for job training, vocational education, and related support.	150,000	Reid
Foundation of the Delaware County Chamber, Media, PA, for job training programs.	75,000	Specter
Goodwill Industries of Southeastern Wisconsin, Inc., Milwaukee, WI, to provide training, employment and supportive services, including for individuals with disabilities.	250,000	Kohl
Hamilton County Government, Chattanooga, TN, for a workforce initiative .....	150,000	Alexander
Harrisburg Area Community College, Harrisburg, PA, for job training programs.	75,000	Specter
Idaho Women Work! at Eastern Idaho Technical College, Idaho Falls, ID, to continue and expand the Recruiting for the Information Technology Age (RITA) initiative in Idaho.	150,000	Craig

Project	Committee recommendation	Requested by
Iowa Policy Project, Mount Vernon, IA, for a study on temporary and contingent workers.	400,000	Harkin
Iowa Valley Community College, Marshalltown, IA, for community outreach and training center.	175,000	Harkin
Linking Employment, Abilities and Potential, Cleveland, Ohio, for training and skill development services for individuals with disabilities in coordination with the local workforce investment system.	200,000	Brown
MAGLEV Inc., McKeesport, PA, for a training program in advanced precision fabrication.	100,000	Specter
Massachusetts League of Community Health Centers, East Boston, MA, for a health-care workforce development program.	200,000	Kennedy, Kerry
Maui Community College, HI, for the Remote Rural Hawaii Job Training project	2,400,000	Inouye
Maui Community College Training and Educational Opportunities, HI, for training and education.	1,800,000	Inouye
Maui Economic Development Board, HI, for high tech training .....	475,000	Inouye
Maui Economic Development Board, HI, for the rural computer utilization training program.	300,000	Inouye
Memphis, Tennessee, for a prisoner re-entry program .....	250,000	Alexander
Minnesota State Colleges and Universities, St. Paul, MN, for rapid reemployment services for veterans.	1,000,000	Coleman, Klobuchar
Minot State University, Minot, ND, to provide training and master's degrees to Job Corps Center senior management personnel.	750,000	Dorgan, Conrad
Mississippi State University, Mississippi State, MS, for the Mississippi Integrated Workforce Performance System.	400,000	Cochran
Mississippi State University, Mississippi State, MS, for training development and delivery system at the Distributed Learning System for Workforce Training Program.	200,000	Cochran
Mississippi Technology Alliance, Ridgeland, MS, for the Center for Innovation and Entrepreneurial Services.	150,000	Cochran
Mississippi Valley State University, Itta Bena, MS, for training and development programs at the Automated Identification Technology (AIT)/Automatic Data Collection (ADC).	200,000	Cochran
Moreno Valley, CA, to provide vocational training for young adults, as well as the development of an internship with local businesses to put the trainees' job skills to use upon graduation.	150,000	Boxer
National Council of La Raza in Washington, DC, to provide technical assistance on Hispanic workforce issues including capacity building, language barriers, and health care job training in Iowa and other Midwestern States.	500,000	Harkin
Neumann College, Aston, PA, for the Partnership Advancing Training for Careers in Health program.	75,000	Specter
North Side Industrial Development Corporation, Pittsburgh, PA, for job training programs.	75,000	Specter
Northwest Washington Electrical Industry Joint Apprenticeship and Training Committee, Mount Vernon, WA, for expanded training capability, including the acquisition of training equipment, to meet the need for skilled electrical workers.	150,000	Murray
Northwest Wisconsin Concentrated Employment Program, Inc., Ashland, WI, for workforce development training in Northwest Wisconsin.	300,000	Kohl
Pacific Mountain Workforce Consortium, Tumwater, WA, for training of qualified foresters and restoration professionals in Lewis County.	200,000	Murray
Pennsylvania Women Work!, Pittsburgh, PA, for job training programs .....	100,000	Specter
Philadelphia Shipyard Development Corporation, Philadelphia, PA, for job training programs.	100,000	Specter
Philadelphia Veterans Multi-Service & Education Center, Philadelphia, PA, for veterans job training.	75,000	Specter
Pittsburgh Airport Area Chamber of Commerce Enterprise Foundation, Pittsburgh, PA, for workforce development.	75,000	Specter
Port Jobs, in partnership with South Seattle Community College, Seattle, WA, for training of entry-level airport workers.	100,000	Murray
Portland Community College, Portland, OR, to support the Center for Business and Industry.	100,000	Wyden, Smith
Project ARRIBA, El Paso, TX, for workforce development in the West Texas region.	100,000	Hutchison
Rhodes State College, Lima, Ohio, for equipment, curriculum development, training and internships for high-tech engineering technology programs.	150,000	Brown

Project	Committee recommendation	Requested by
Rural Enterprises of Oklahoma, Inc., Durant, OK, for entrepreneurship training programs.	100,000	Inhofe
Saint Leonard's Ministries, Chicago, IL, for job training and placement for ex-offenders.	350,000	Durbin
San Jose, CA, for job training for the homeless .....	400,000	Feinstein
Santa Ana, CA, for the Work Experience and Literacy Program .....	900,000	Feinstein, Boxer
Santa Maria El Mirador, Santa Fe, NM, to provide an employment training program.	700,000	Domenici
Southwest Washington Workforce Development Council, Vancouver, WA, to create and sustain a partnership between business, education and workforce leaders in Southwest Washington.	200,000	Murray
STRIVE/East Harlem Employment Service, Inc., New York, NY, for the Core job training program.	500,000	Schumer, Clinton
Twin Cities Rise!, Minneapolis, MN, for job training initiatives .....	300,000	Klobuchar
United Auto Workers Region 9 Training Initiative, in New York, for Competitive Employment Training Assistance.	250,000	Schumer, Clinton
University of Mississippi, University, MS, for the Southeastern Center for Human Resources Management to develop a partnership between corporations and university scholars.	100,000	Cochran
University of Southern Mississippi, Hattiesburg, MS, for Workforce Training in Marine Composite.	500,000	Cochran
University of West Florida, Pensacola, FL, for the Hometown Heroes Teach program, for teaching certificates for veterans.	100,000	Martinez
Urban League of Lancaster County, Inc., Lancaster, PA, for job training programs.	75,000	Specter
Vermont Department of Labor, Montpelier, VT, for job training of female inmates in Vermont as they prepare to reenter the workforce.	600,000	Leahy
Vermont Healthcare and Information Technology Education Center, Williston, VT, for advanced manufacturing training of displaced workers.	250,000	Leahy
Vermont Healthcare and Information Technology Education Center, Williston, VT, for health care training of displaced workers.	650,000	Leahy
Vermont Technical College and Vermont Workforce Development Council, Randolph Center, VT, to provide job training to displaced workers in Vermont.	700,000	Leahy
Washington Workforce Association, Vancouver, WA, for job shadowing, internships, and scholarships to prepare students for high-demand occupations.	500,000	Murray
Washington, Ozaukee, Waukesha Workforce Development Inc., Pewaukee, WI, for advanced manufacturing and technology training.	450,000	Kohl
Wisconsin Community Action Program, Madison, WI, for job training assistance of low-income individuals.	325,000	Kohl
Wisconsin Regional Training Partnership, Milwaukee, WI, to assess, prepare, and place job-ready candidates in construction, manufacturing, and other skilled trades and industries.	300,000	Kohl
Workforce Connections, Inc., La Crosse, WI, to develop and implement strategic workforce development activities in Western Wisconsin.	150,000	Kohl
Workforce Resource, Inc., Menomonie, WI, for employment assistance .....	250,000	Kohl
Wrightco Technologies, Inc, Claysburg, PA, to provide job training, retraining and vocational educational programs.	100,000	Specter

*Responsible Reintegration of Youthful Offenders.*—The Committee recommendation includes \$55,000,000 to continue funding for the current Responsible Reintegration of Youthful Offenders program. The comparable fiscal year 2007 level is \$49,104,000, while the budget proposed to eliminate funding for this program. The Responsible Reintegration of Youthful Offenders program targets critical funding to help prepare and assist young offenders to return to their communities. The program also provides support, opportunities, education and training to youth who are court-involved and on probation, in aftercare, on parole, or who would benefit from alternatives to incarceration or diversion from formal judicial proceedings. The Committee intends that funds available for this purpose under the fiscal year 2007 appropriation and this act

be used to continue the youth violence prevention initiative initiated with program year 2006 funds.

*Prisoner Re-entry.*—The Committee recommendation does not include funding for the Prisoner Re-entry initiative. The comparable fiscal year 2007 level is \$19,642,000, while the budget request proposed eliminating funding for this purpose. The budget proposes to redirect these funds to a new Responsible Reintegration of Ex-Offenders program described below.

*Responsible Reintegration of Ex-Offenders.*—The Committee recommends \$13,642,000 for the Responsible Reintegration of Ex-Offenders program. The budget request includes \$39,600,000 for this new initiative. Funds would be used to connect adult ex-offenders with pre-release, mentoring, housing, case management and employment services, utilizing the best practices learned from the Prisoner Re-entry initiative.

The Committee urges the Department to award grants to organizations that will: (1) implement programs, practices, or strategies shown in well-designed randomized controlled trials to have sizable, sustained effects on important workforce and reintegration outcomes; (2) adhere closely to the specific elements of the proven program, practice, or strategy; and (3) obtain sizeable matching funds for their project from other Federal or non-Federal sources, such as the Adult Training formula grant program authorized under the Workforce Investment Act of 1998, or State or local programs.

*Evaluation.*—The Committee recommends \$4,921,000 to provide for the continuing evaluation of programs conducted under the Workforce Investment Act, as well as of Federally-funded employment-related activities under other provisions of law. The comparable fiscal year 2007 level is \$4,921,000 and the budget request includes \$7,000,000 for this purpose.

*Community-based Job Training Grants.*—The Committee recommends \$125,000,000 for this initiative from the Dislocated Worker National Reserve, as described earlier in this section. This is the same financing arrangement provided for in last year's bill. The budget request includes \$150,000,000 for this initiative. The Committee recommendation includes a general provision requiring these grants to be awarded competitively.

*Denali Commission.*—The Committee recommends \$6,875,000 for the Denali Commission, as authorized in Public Law 108-7, for job training in connection with infrastructure building projects it funds in rural Alaska. The comparable fiscal year 2007 level is \$6,875,000, while the budget proposes to eliminate funding for this purpose. Funding will allow un- and underemployed rural Alaskans to train for better jobs in their villages.

*Other.*—The Committee does not recommend additional resources for the provision of technical assistance activities funded previously from this category. The comparable fiscal year 2007 level is \$480,000 and the budget request did not recommend funding for this activity. Funds are available for this purpose under the pilots, demonstrations and research program.

*Job Training for Employment in High Growth Industries.*—The Committee continues to have a strong interest in the initiatives funded from H-1B fees for job training services and related capac-

ity-building activities. The Committee is concerned that 90 percent of the funds made available under the High Growth Job Training Initiative have not been awarded on a competitive basis. The Committee recommendation continues language similar to that included in last year's bill which requires awards under the High Growth Job Training Initiative, Community Based Job Training Grants and Workforce Innovation in Regional Economic Development initiative to be made on a competitive basis.

The Committee notes that there is limited evidence of the training outcomes achieved under the Department's Demand Driven Workforce Initiative, which includes the High Growth Job Training Initiative, Community Based Job Training Grants program, and Workforce Innovation in Regional Economic Development initiative. The Committee is also concerned that this initiative is not sufficiently linked with the workforce development system. The Committee requests the Department provide information in the fiscal year 2009 budget justification on the initiative's integration with the public workforce development system, evaluation plan, and performance outcomes and measures.

The Committee notes that the United States is in the midst of a nursing shortage that is expected to intensify as baby boomers age and the need for health care grows. In April 2006, the Health Resources and Services Administration released projections that the Nation's nursing shortage would grow to more than one million nurses by the year 2020. According to American Association of Colleges of Nursing, U.S. nursing schools turned away almost 42,000 qualified nursing school applicants due in part to an insufficient number of faculty. The Committee encourages the Department to consider ways to support nursing schools efforts to address this workforce shortage, including methods of alleviating the nurse faculty shortage.

COMMUNITY SERVICE EMPLOYMENT FOR OLDER AMERICANS

Appropriations, 2007 .....	\$483,611,000
Budget estimate, 2008 .....	350,000,000
Committee recommendation .....	483,611,000

The Committee recommends \$483,611,000 for community service employment for older Americans. The comparable fiscal year 2007 level is \$483,611,000 and the budget request includes \$350,000,000. This program, authorized by title V of the Older Americans Act, provides part-time employment in community service activities for unemployed, low-income persons aged 55 and over. It is a forward-funded program, so the fiscal year 2008 appropriation will support the program from July 1, 2008, through June 30, 2009.

The program provides a direct, efficient, and quick means to assist economically disadvantaged older workers because it has a proven effective network in every State and in practically every county. Administrative costs for the program are low, and the vast majority of the money goes directly to low-income seniors as wages and fringe benefits.

The program provides a wide range of vital community services that would not otherwise be available, particularly in low-income areas and in minority neighborhoods. Senior enrollees provide necessary and valuable services at Head Start centers, schools, hos-

pitals, libraries, elderly nutrition sites, senior center, and elsewhere in the community. These services would not be available without the program.

A large proportion of senior enrollees use their work experience and training to obtain employment in the private sector. This not only increases our Nation's tax base, but it also enables more low-income seniors to participate in the program.

The Committee believes that the program should pay special attention to providing community service jobs for older Americans with poor employment prospects, including individuals with a long-term detachment from the labor force, older displaced homemakers, aged minorities, limited English-speaking persons, and legal immigrants.

FEDERAL UNEMPLOYMENT BENEFITS AND ALLOWANCES

Appropriations, 2007 .....	\$837,600,000
Budget estimate, 2008 .....	888,700,000
Committee recommendation .....	888,700,000

The Committee recommends \$888,700,000 for Federal Unemployment Benefits and Allowances. The comparable fiscal year 2007 amount is \$837,600,000 and the budget request includes \$888,700,000 for this purpose. Trade adjustment benefit payments are expected to increase from \$558,000,000 in fiscal year 2007 to \$606,000,000 in fiscal year 2008, while trade training in fiscal year 2008 will remain roughly constant at \$259,700,000 with an estimated 80,000 participants.

The Trade Adjustment Assistance Reform Act of 2002 that amended the Trade Act of 1974 was signed into law on August 6, 2002. This act consolidated the previous Trade Adjustment Assistance [TAA] and NAFTA Transitional Adjustment Assistance programs, into a single, enhanced TAA program with expanded eligibility, services, and benefits. Additionally, the act provides a program of Alternative Trade Adjustment Assistance for Older Workers.

STATE UNEMPLOYMENT INSURANCE AND EMPLOYMENT SERVICE OPERATIONS

Appropriations, 2007 .....	\$3,340,350,000
Budget estimate, 2008 .....	3,338,753,000
Committee recommendation .....	3,386,632,000

The Committee recommends \$3,386,632,000 for this account. The recommendation includes \$3,288,223,000 authorized to be drawn from the Employment Security Administration account of the unemployment trust fund, and \$98,409,000 to be provided from the general fund of the Treasury.

The funds in this account are used to provide administrative grants and assistance to State agencies which administer Federal and State unemployment compensation laws and operate the public employment service.

The Committee bill includes language proposed in the budget request that would allow States to pay the cost of penalty mail from funds allotted to them under the Wagner-Peyser Act. Previously, the Department held such funds back from State allotments and paid these costs directly. New language proposed in the budget also

is included that allows States to use funds appropriated under this account to assist other States if they are impacted by a major disaster declared by the President.

The Committee recommends a total of \$2,561,223,000 for unemployment insurance activities.

For unemployment insurance [UI] State operations, the Committee recommends \$2,510,723,000. These funds are available for obligation by States through December 31, 2008. However, funds used for automation acquisitions are available for obligation by States through September 30, 2010.

The recommendation includes \$10,000,000 to conduct in-person reemployment and eligibility assessments in one-stop career centers of claimants of unemployment insurance. In addition, \$40,000,000 is available for this purpose through a discretionary cap adjustment, as provided for in the fiscal year 2008 budget resolution. These program integrity activities will save more than \$200,000,000 annually in overpayments from the unemployment insurance trust fund. The Committee bill includes language proposed in the budget request that requires the Secretary of Labor to submit interim and final reports on the outcomes achieved through these activities, their associated estimated savings, and identification of best practices that may be replicated.

In addition, the Committee recommendation provides for a contingency reserve amount should the unemployment workload exceed an average weekly insured claims volume of 2,786,000. This contingency amount would fund the administrative costs of the unemployment insurance workload over the level of 2,786,000 insured unemployed per week at a rate of \$28,600,000 per 100,000 insured unemployed, with a pro rata amount granted for amounts of less than 100,000 insured unemployed. The President's budget provides for a contingency threshold level of 2,629,000.

For unemployment insurance national activities, the Committee recommends \$10,500,000. These funds are directed to activities that benefit the State/Federal unemployment insurance program, including helping States adopt common technology-based solutions to improve efficiency and performance, supporting training and contracting for actuarial support for State trust fund management.

For the Employment Service allotments to States, the Committee recommends \$715,883,000 which includes \$22,883,000 in general funds together with an authorization to spend \$693,000,000 from the Employment Security Administration account of the unemployment trust fund. The comparable fiscal year 2007 amount is \$715,883,000 and the budget request includes \$688,779,000 for allotments to States. These funds are available for the program year of July 1, 2008 through June 30, 2009.

The Committee also recommends \$34,000,000 for Employment Service national activities. The comparable fiscal year 2007 amount is \$33,428,000 and the budget request includes \$32,766,000 for these activities. Within the recommendation, \$12,740,000 is for foreign labor certification programs and \$2,349,000 is for technical assistance and training, and State workforce agency independent retirement plans, the full amounts requested in the budget. The recommendation also includes \$19,000,000 for the administrative activities related to the work opportunity tax credit program.

For One-Stop Career Centers and Labor Market Information, the Committee recommends \$55,985,000. The comparable fiscal year 2007 level is \$63,855,000 and the budget request includes \$55,985,000 for these activities. The Committee recommendation includes funding for America’s Labor Market Information System, including core employment statistics, universal access for customers, improving efficiency in labor market transactions, and measuring and displaying WIA performance information.

The Committee recommends \$19,541,000 for the Work Incentives Grants program, to help persons with disabilities find and retain jobs through the One-Stop Career Center system mandated by the Workforce Investment Act. The comparable fiscal year 2007 level is \$19,514,000, while the budget request proposes to eliminate funding for these activities. Funding will support grants, including the Disability Program Navigator initiative, intended to ensure that One-Stop systems integrate and coordinate mainstream employment and training programs with essential employment-related services for persons with disabilities. The Committee recommendation includes sufficient funding for evaluation, capacity building, training, and technical assistance activities, which continues to be needed given the recent expansion to 47 States.

ADVANCES TO THE UNEMPLOYMENT TRUST FUND AND OTHER FUNDS

Appropriations, 2007 .....	\$465,000,000
Budget estimate, 2008 .....	437,000,000
Committee recommendation .....	437,000,000

The Committee recommends \$437,000,000 for this account. The comparable fiscal year 2007 funding level is \$465,000,000 and the budget request includes \$437,000,000 for this purpose. The appropriation is available to provide advances to several accounts for purposes authorized under various Federal and State unemployment compensation laws and the Black Lung Disability Trust Fund, whenever balances in such accounts prove insufficient. The Committee recommendation assumes that fiscal year 2008 advances will be made to the Black Lung Disability Trust Fund, as proposed in the budget request.

The separate appropriations provided by the Committee for all other accounts eligible to borrow from this account in fiscal year 2008 are expected to be sufficient. Should the need arise, due to unanticipated changes in the economic situation, laws, or for other legitimate reasons, advances will be made to the appropriate accounts to the extent funds are available. Funds advanced to the Black Lung Disability Trust Fund are now repayable with interest to the general fund of the Treasury.

PROGRAM ADMINISTRATION

Appropriations, 2007 .....	\$199,708,000
Budget estimate, 2008 .....	216,162,000
Committee recommendation .....	185,505,000

The Committee recommendation includes \$91,133,000 in general funds for this account, as well as authority to expend \$94,372,000 from the Employment Security Administration account of the unemployment trust fund, for a total of \$185,505,000. The recommendation includes the full amount requested to accelerate the

processing of backlogged foreign labor certificate cases. The Committee expects a progress report by August 31, 2007, detailing the status of efforts to eliminate the backlog of pending foreign labor certification applications.

The Committee recommendation reflects shifting \$28,872,000 in Job Corps staffing costs to a separate appropriation account.

General funds in this account provide the Federal staff to administer employment and training programs under the Workforce Investment Act, the Older Americans Act, the Trade Act of 1974, the Denali Commission Act, the Women in Apprenticeship and Non-Traditional Occupations Act of 1992, and the National Apprenticeship Act. Trust funds provide for the Federal administration of employment security functions under title III of the Social Security Act and the Immigration and Nationality Act, as amended.

In addition, \$13,000,000 is estimated to be available from H-1B fees for processing H-1B alien labor certification applications. It is estimated that an additional \$475,000 will be reimbursed by the Federal Emergency Management Agency for support of disaster unemployment activities.

The Committee believes that the public workforce system is strengthened by the effective participation of all of the stakeholders in the system and urges that the Department use a portion of its discretionary funds to support that participation through grants and contracts to intergovernmental, business, labor, and community-based organizations dedicated to training and technical assistance in support of Workforce Investment Boards and their members.

EMPLOYEE BENEFITS SECURITY ADMINISTRATION

SALARIES AND EXPENSES

Appropriations, 2007 .....	\$141,573,000
Budget estimate, 2008 .....	147,425,000
Committee recommendation .....	143,262,000

The Committee recommends \$143,262,000 for this account. The comparable fiscal year 2007 amount is \$141,573,000 and the budget request includes \$147,425,000.

The Employee Benefits Security Administration [EBSA] is responsible for the enforcement of title I of the Employee Retirement Income Security Act of 1974 [ERISA] in both civil and criminal areas. ESBA is also responsible for enforcement of sections 8477 and 8478 of the Federal Employees' Retirement Security Act of 1986 [FERSA]. In accordance with the requirements of FERSA, the Secretary of Labor has promulgated regulations and prohibited transactions class exemptions under the fiduciary responsibility and fiduciary bonding provisions of the law governing the Thrift Savings Plan for Federal employees. In addition, the Secretary of Labor has, pursuant to the requirement of section 8477(g)(1) of FERSA, established a program to carry out audits to determine the level of compliance with the fiduciary responsibility provisions of FERSA applicable to Thrift Savings Plan fiduciaries. ESBA provides funding for the enforcement and compliance; policy, regulation, and public services; and program oversight activities.

The Committee recommendation is below the budget request because the Department assumed that Congress had not provided any funds for the EFAST2 system during the fiscal year 2007 appropriation process. However, funding was made available in fiscal year 2007, so \$5,000,000 of the request for this system is not needed.

The Committee recommendation also assumes that EBSA will contribute an additional amount of \$2,500,000 from its fiscal years 2007 and 2008 appropriations for the EFAST2 system, generated by one-time cost savings proposed in the last 2 years' budget requests. The Committee expects EBSA to avoid any negative impact of the project's financing on enforcement activities, and compliance outreach and education programs. The Committee requests a briefing on EBSA's plans for the EFAST2 system prior to the announcement of the availability of funds for its development.

#### PENSION BENEFIT GUARANTY CORPORATION

The Corporation's estimated obligations for fiscal year 2008 include single employer benefit payments of \$4,831,000,000, multiemployer financial assistance of \$106,000,000 and administrative expenses of \$411,151,000. Administrative expenses are comprised of three activities: (1) Pension insurance activities, \$74,784,000; (2) pension plan termination expenses, \$205,158,000; and (3) operational support, \$131,209,000. Such expenditures will be financed by permanent authority.

The Pension Benefit Guaranty Corporation is a wholly owned Government corporation established by the Employee Retirement Income Security Act of 1974. The law places it within the Department of Labor and makes the Secretary of Labor the chair of its board of directors. The corporation receives its income primarily from insurance premiums collected from covered pension plans, assets of terminated pension plans, collection of employer liabilities imposed by the act, and investment earnings. It is also authorized to borrow up to \$100,000,000 from the Treasury. The primary purpose of the corporation is to guarantee the payment of pension plan benefits to participants if covered defined benefit plans fail or go out of existence.

The President's budget proposes a contingency fund for the PBGC when the number of participants in terminated plans exceeds 100,000. When the trigger is reached, an additional \$9,200,000 becomes available for every 20,000 participants in terminated plans. The Committee recommendation includes this language to ensure that the PBGC can take immediate, uninterrupted action to protect participants' pension benefits. The Committee expects to be notified immediately of the availability of any funds made available by this provision.

The President's budget also includes language that provides \$50,000 in additional funds for investment management fees for every \$25,000,000 in assets received by the PBGC. The language also stipulates that the Committees on Appropriations of the House of Representatives and Senate be notified of the availability of funds made available by this provision. The Committee bill includes the requested language.

The single-employer program protects about 34.2 million participants in about 28,800 defined benefit pension plans. The multi-employer insurance program protects about 9.7 million participants in more than 1,600 plans.

EMPLOYMENT STANDARDS ADMINISTRATION  
SALARIES AND EXPENSES

Appropriations, 2007 .....	\$420,871,000
Budget estimate, 2008 .....	447,659,000
Committee recommendation .....	438,508,000

The Committee recommendation includes \$438,508,000 for this account. The bill contains authority to expend \$2,111,000 from the special fund established by the Longshore and Harbor Workers' Compensation Act; the remainder of \$436,397,000 are general funds. In addition, an amount of \$32,761,000 is available by transfer from the black lung disability trust fund. Language also is included that authorizes the Employment Standards Administration to assess and collect fees to defray the cost for processing applications for homemaker and special minimum wage certifications, and applications for registration under the Migrant and Seasonal Agricultural Worker Protection Act.

The Employment Standards Administration is involved in the administration of numerous laws, including the Fair Labor Standards Act, the Immigration and Nationality Act, the Migrant and Seasonal Agricultural Workers' Protection Act, the Davis-Bacon Act, the Family and Medical Leave Act, the Federal Employees' Compensation Act [FECA], the Longshore and Harbor Workers' Compensation Act, and the Federal Mine Safety and Health Act (black lung).

This recommendation provides sufficient funding to offset the impact of inflation, and includes \$5,000,000 for both existing and newly funded investigators to conduct inspections and investigations of industries with high concentrations of low-wage and other vulnerable workers, and industries with high levels of wage and hour violations, including overtime violations.

The Committee requests the Department to include, as part of its fiscal year 2009 budget justification, a detailed report on its enforcement efforts aimed at low-wage industries, including: the measures being used to gauge compliance; the enforcement strategy being pursued in each of these industries; the number of investigators who are bilingual (and in what languages); the number of investigations prompted by complaints from workers and those initiated by the Department; the number of workers covered by those investigations; the employer practices that form the basis of complaints; and the findings and actions taken, including recovery of back wages.

The Committee is concerned about the misclassification of employees as independent contractors, which undermines enforcement of the Nation's worker-protection laws. The Committee encourages the Wage and Hour Division to focus increased attention of investigative personnel and resources to detecting and taking enforcement actions against the illegal misclassification of workers and unreported cash pay. The Committee requests that the fiscal year

2009 budget justification include detailed information on the Department's enforcement strategy and record on misclassification and unreported cash pay, including: the measures established to gauge compliance; the number of investigations prompted by complaints from workers and those initiated by the Department; the number of workers covered by those investigations; descriptive data on the employer practices that form the basis of the complaint; and the findings and actions taken, including recovery of back pay, other compensatory measures, and cross-referral of complaints to the Internal Revenue Service.

The recommendation includes \$2,000,000 to continue activities for the expeditious startup of a system to resolve claims of victims for bodily injury caused by asbestos exposure. This may include contracts with individuals or entities having relevant experience to assist in jump starting the program, as described in S. 852, the Fair Act of 2005. Activities to shorten the lead-time for implementation of asbestos activities encompass procedures for the processing of claims, including procedures for the expediting of exigent health claims, and planning for promulgation of regulations.

The Committee recommendation includes a rescission of \$70,000,000 in unexpended balances from H-1B fee receipts the Department has been unable to spend over the past several fiscal years. The budget proposes to rescind \$50,000,000 of these balances.

SPECIAL BENEFITS

Appropriations, 2007 .....	\$227,000,000
Budget estimate, 2008 .....	203,000,000
Committee recommendation .....	203,000,000

The Committee recommends \$203,000,000 for this account. The comparable fiscal year 2007 amount is \$227,000,000 and the budget request includes \$203,000,000 for this purpose. The appropriation primarily provides benefits under the Federal Employees' Compensation Act [FECA]. The payments are prescribed by law. In fiscal year 2008, an estimated 140,000 injured Federal workers or their survivors will file claims; 55,000 will receive long-term wage replacement benefits for job-related injuries, diseases, or deaths.

The Committee recommends continuation of appropriation language to provide authority to require disclosure of Social Security account numbers by individuals filing claims under the Federal Employees' Compensation Act or the Longshore and Harbor Workers' Compensation Act and its extensions.

The Committee recommends continuation of appropriation language that provides authority to use the FECA fund to reimburse a new employer for a portion of the salary of a newly reemployed injured Federal worker. The FECA funds will be used to reimburse new employers during the first 3 years of employment not to exceed 75 percent of salary in the worker's first year, declining thereafter.

The Committee recommendation also continues language allowing carryover of unobligated balances from fiscal year 2007 to be used in the following year.

The Committee again includes appropriation language that retains the drawdown date of August 15. The drawdown authority

enables the agency to meet any immediate shortage of funds without requesting supplemental appropriations. The August 15 draw-down date allows flexibility for continuation of benefit payments without interruption.

The Committee recommends continuation of appropriation language to provide authority to deposit into the special benefits account of the employees' compensation fund those funds that the Postal Service, the Tennessee Valley Authority, and other entities are required to pay to cover their fair share of the costs of administering the claims filed by their employees under FECA. The Committee concurs with requested bill language to allow use of fair share collections to fund capital investment projects and specific initiatives to strengthen compensation fund control and oversight.

SPECIAL BENEFITS FOR DISABLED COAL MINERS

Appropriations, 2007 .....	\$229,373,000
Budget estimate, 2008 .....	208,221,000
Committee recommendation .....	208,221,000

The Committee recommends an appropriation of \$208,221,000 in fiscal year 2008 for special benefits for disabled coal miners. This is in addition to the \$68,000,000 appropriated last year as an advance for the first quarter of fiscal year 2008. These funds are used to provide monthly benefits to coal miners disabled by black lung disease and to their widows and certain other dependents, as well as to pay related administrative costs.

The Black Lung Consolidation of Administrative Responsibility Act was enacted on November 2, 2002. The act amends the Black Lung Benefits Act to transfer part B black lung benefits responsibility from the Commissioner of Social Security to the Secretary of Labor, thus consolidating all black lung benefit responsibility under the Secretary. Part B benefits are based on claims filed on or before December 31, 1973. The Secretary of Labor is already responsible for the part C claims filed after December 31, 1973. In fiscal year 2008, an estimated 31,800 beneficiaries will receive benefits.

By law, increases in black lung benefit payments are tied directly to Federal pay increases. The year-to-year decrease in this account reflects a declining beneficiary population.

The Committee recommends an advance appropriation of \$62,000,000 for the first quarter of fiscal year 2009, the same as the administration request. These funds will ensure uninterrupted benefit payments to coal miners, their widows, and dependents.

ENERGY EMPLOYEES OCCUPATIONAL ILLNESS COMPENSATION PROGRAM

Appropriations, 2007 .....	\$102,307,000
Budget estimate, 2008 .....	104,745,000
Committee recommendation .....	104,745,000

The Committee recommends \$104,745,000 for the Energy Employees Occupational Illness Compensation Program [EEOICP]. The comparable fiscal year 2007 amount is \$102,307,000 and the budget request includes \$104,745,000 for this program.

The objective of the EEOICP is to deliver benefits to eligible employees and former employees of the Department of Energy, its con-

tractors and subcontractors or to certain survivors of such individuals, as provided in the Energy Employees Occupational Illness Compensation Program Act. The mission also includes delivering benefits to certain beneficiaries of the Radiation Exposure Compensation Act.

The Department of Labor’s Office of Workers’ Compensation Programs within the Employment Standards Administration is responsible for adjudicating and administering claims filed by employees or former employees (or their survivors) under the act. The program went into effect on July 31, 2001.

In 2008, the volume of incoming claims under part B of the EEOICP is estimated to remain stable at about 7,000 claims from Department of Energy [DOE] employees or survivors, and private companies under contract with DOE, who suffer from a radiation-related cancer, beryllium-related disease, or chronic silicosis as a result of their work in producing or testing nuclear weapons.

Under part E, the Department is expected to receive approximately 12,000 new claims during fiscal year 2008. Under this authority, the Department provides benefits to eligible DOE contractor employees or their survivors who were found to have work-related occupational illnesses due to exposure to a toxic substance at a DOE facility.

The Committee expects that the administration refrain from unilateral changes to reduce the cost of benefits for current or pending cohorts of atomic weapons workers with cancer under the Energy Employees Occupational Illness Compensation Program until such time as Congress approves proposed changes. The Advisory Board on Radiation and Worker Health was created by Congress to review applications based on scientific and medical evidence, with as much independence and objectivity as possible. To ensure that the Advisory Board can retain its autonomy, the Committee has retained language which transfers \$4,500,000 in administrative funds within 30 days of enactment to the National Institute for Occupational Safety and Health for the exclusive use of the Board and its audit contractor.

BLACK LUNG DISABILITY TRUST FUND

Appropriations, 2007 .....	\$1,069,546,000
Budget estimate, 2008 .....	1,068,000,000
Committee recommendation .....	1,068,000,000

The Committee recommends \$1,068,000,000 for this account in 2008. The comparable fiscal year 2007 amount is \$1,069,546,000 and the budget request includes \$1,068,000,000 for this purpose.

The appropriation language continues to provide indefinite authority for the Black Lung Disability Trust Fund to provide for benefit payments. The recommendation assumes that \$1,009,763,000 for benefit payments and interest, comprised of \$270,763,000 for benefits payments and \$739,000,000 for interest payments will be paid in fiscal year 2008. In addition, the appropriation bill provides for transfers from the trust fund for administrative expense for the following Department of Labor agencies: up to \$32,761,000 for the Employment Standards Administration, up to \$24,785,000 for Departmental Management, Salaries and Expenses, and up to \$335,000 for Departmental Management, Inspec-

tor General. The bill also allows a transfer of up to \$356,000 for the Department of Treasury.

The trust fund pays all black lung compensation/medical and survivor benefit expenses when no responsible mine operation can be assigned liability for such benefits, or when coal mine employment ceased prior to 1970, as well as all administrative costs which are incurred in administering the benefits program and operating the trust fund.

It is estimated that 32,820 individuals will be receiving black lung benefits financed through the end of the fiscal year 2008.

The basic financing for the trust fund comes from a coal excise tax for underground and surface-mined coal. Additional funds come from reimbursement from the Advances to the Unemployment Trust Fund and Other Funds as well as payments from mine operators for benefit payments made by the trust fund before the mine operator is found liable. The advances to the fund assure availability of necessary funds when liabilities may exceed other income. The Omnibus Budget Reconciliation Act of 1987 continues the current tax structure until 2014.

OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION

SALARIES AND EXPENSES

Appropriations, 2007 .....	\$486,925,000
Budget estimate, 2008 .....	490,277,000
Committee recommendation .....	498,445,000

The Committee recommends \$498,445,000 for this account. The comparable fiscal year 2007 amount is \$486,925,000 and the budget request includes \$490,277,000 for authorized activities. This agency is responsible for enforcing the Occupational Safety and Health Act of 1970 in the Nation's workplaces.

In addition, the Committee has included language to allow OSHA to retain up to \$750,000 per fiscal year of training institute course tuition fees to be utilized for occupational safety and health training and education grants in the private sector.

The Committee retains language carried in last year's bill effectively exempting farms employing 10 or fewer people from the provisions of the act except those farms having a temporary labor camp. The Committee also retains language exempting small firms in industry classifications having a lost workday injury rate less than the national average from general schedule safety inspections. These provisions have been in the bill for many years.

The Committee is concerned that OSHA's standard setting and enforcement capabilities have been diminished over the past several years, due in part to declining budgets. The number of employees covered by inspections has fallen from almost 2.1 million in fiscal year 2000 to just more than 1.2 million in fiscal year 2006, a decline of more than 70 percent. The Committee recommendation takes a first step toward reversing that decline by providing an increase of more than \$11,000,000 for Federal enforcement. The Committee directs a portion of these additional funds to address the recommendations of the Chemical Safety and Hazard Investigation Board's related to the March 2005 Texas City refinery explosion, including: conducting comprehensive inspection of facilities at

the greatest risk of catastrophic accident and hiring or developing new, specialized inspectors capable to enforce the process safety management standard. Funds not used for this purpose shall be directed toward rebuilding the overall enforcement capacity at OSHA through the hiring of new inspectors. Not later than 30 days after the date of enactment of this act, the Committee directs OSHA to provide a report on its plan for meeting the Board's recommendations and the Committee's intent in providing these additional funds, and quarterly reports thereafter on progress toward implementing this plan.

The Committee also is concerned about the pace of occupational safety and health standards setting at OSHA, which has essentially drawn to a halt despite planned timetables announced in its regulatory agendas. In a number of areas, including the personal protective equipment standard which has been in development for 8 years, and the diacetyl standard, OSHA has not met its own deadlines for developing and issuing occupational health and safety standards. The Committee directs OSHA to provide a detailed timetable for planned actions on occupational health and safety standards not later than 30 days after enactment of this act and quarterly reports thereafter on progress on implementing the plan, including an explanation of any deviations from the initial timetable provided to the Committee.

Over the past 2 years, the Committee has provided \$5,620,000,000 to prepare for the outbreak of an influenza pandemic and includes an additional \$888,000,000 in this bill for that purpose. However, despite this sense of urgency for the Committee and other executive branch agencies, the Committee notes the Department believes that in order to issue an emergency standard to protect the health and safety of healthcare workers and emergency responders the United States needs to be in the midst of an influenza pandemic. The Committee is troubled by this interpretation and urges OSHA to reconsider the standard-setting actions it can take on an emergency or expedited basis related to an influenza pandemic. The Committee requests a letter report not later than July 31, 2007 detailing the Department's reconsideration of this issue and a plan for developing and issuing a standard on this issue.

The Committee is dissatisfied with the lack of progress on OSHA's regulation concerning Employer Payment for Personal Protective Equipment, the public comment period for which ended over 7 years ago. This is particularly important for Hispanic workers and immigrant workers who experience a disproportionate and growing number of injuries and fatalities. The Committee expects the Secretary to issue a final standard before November 30, 2007 that is at least as protective as the one promulgated in 1999.

The Committee notes that, in 2005, there were 375,540 serious ergonomic injuries resulting in time off the job reported by employers. The Committee is concerned that the Department has failed to make sufficient progress on its comprehensive plan to address ergonomic injuries, which included industry-targeted guidelines and tough enforcement measures. Despite this commitment, the Department only issued one ergonomic citation over the past 2 years and 3 of 16 guidelines. Since 2004, the Department has almost

abandoned any action on its announced plan. The Committee directs OSHA to provide not later than 30 days after the date of enactment of this act a report to the Committee detailing the specific steps it will take to complete the issuance of the remaining guidelines and actions to practice the tough enforcement measures. This report should include a timeframe by which all 16 guidelines will be issued and for the implementation of increased enforcement on this issue.

The Committee believes that OSHA’s worker safety and health training and education programs, including the grant program that supports such training, are a critical part of a comprehensive approach to worker protection. The Committee is concerned that OSHA has again cut funding to help establish ongoing worker safety and health training programs and has therefore restored the Susan Harwood training grant program to \$10,116,000. Bill language specifies that no less than \$3,200,000 shall be used to maintain the existing institutional competency building training grants, provided that grantees demonstrate satisfactory performance.

MINE SAFETY AND HEALTH ADMINISTRATION  
SALARIES AND EXPENSES

Appropriations, 2007 .....	\$301,570,000
Budget estimate, 2008 .....	313,478,000
Committee recommendation .....	330,028,000

The Committee recommendation includes \$330,028,000 for this account. The comparable fiscal year 2007 amount is \$301,570,000 and the budget request includes \$313,478,000 for the Mine Safety and Health Administration.

The Committee recommendation also includes bill language providing up to \$2,000,000 for mine rescue and recovery activities, the same as the fiscal year 2007 comparable level. It also retains the provision allowing the Secretary of Labor to use any funds available to the Department to provide for the costs of mine rescue and survival operations in the event of a major disaster.

This agency insures the safety and health of the Nation’s miners by conducting inspections and special investigations of mine operations, promulgating mandatory safety and health standards, cooperating with the States in developing effective State programs, and improving training in conjunction with States and the mining industry.

In addition, bill language is included to allow the National Mine Health and Safety Academy to collect not to exceed \$750,000 for room, board, tuition, and the sale of training materials to be available for mine safety and health education and training activities. Bill language also allows MSHA to retain up to \$1,000,000 from fees collected for the approval and certification of equipment, materials, and explosives for use in mines, and may utilize such sums for such activities.

The Committee recommendation includes \$13,000,000 above the budget request to accelerate the implementation of the MINER Act and improve the health and safety of miners. The Committee believes MSHA needs to move more aggressively in a number of areas where evidence reveals that insufficient progress is being

made, as described below. The additional funds provided over the request are specifically directed toward ensuring MSHA is able to conduct and follow-up on effectively 100 percent of its mandatory inspections; adequately train and hire coal mine safety enforcement personnel; expedite the development and issuance of standards and regulations related to belt-air and refuge chambers; improve the infrastructure at the National Mine Health and Safety Academy; accelerate the certification and approval of safety and health equipment, including the communication and tracking technologies required in the MINER Act; and ensure the compliance with and effectiveness of statutory training requirements. In each of these areas and others specifically required by the MINER Act, the Committee requests quarterly progress reports on the progress being made with funding provided by this Committee.

The Committee notes that MSHA conducted 98 percent of mandatory inspections in the coal industry during fiscal year 2006, a fact that this Committee finds unacceptable. These inspections form the core of the agency's enforcement efforts, and without them, the health and safety of miners is jeopardized. The Committee expects MSHA to ensure that no less than 100 percent of mandatory health and safety inspections are completed in fiscal years 2007 and 2008 and any follow-up actions required are taken in a timely manner.

The Committee also is aware that the Government Accountability Office [GAO] implementation report issued in May of this year identified continued concerns about MSHA's preparedness for dealing with its future workforce needs, which is expected to be significant given that more than 40 percent of underground coal mine inspectors are eligible to retire within the next 5 years. Many of these retirees are highly experienced inspectors, which adds to the impact of these losses. Despite this Committee's efforts, which resulted in an additional \$25,600,000 for MSHA to hire 170 additional enforcement staff and replace losses due to retirement during fiscal years 2006 and 2007, GAO has concluded that MSHA lacks a clear and well-thought-out plan to address the expected turnover in its experienced workforce which could undermine this progress. The Committee urges MSHA to undertake a strategic planning process to identify goals and measures for monitoring and evaluating its progress on staying ahead of the retirement wave and meeting the needs of its enforcement workforce.

The Committee recommendation includes language, under section 110 of the general provisions of this act, requiring the Secretary to revise regulations not later than June 20, 2008, related to the ventilation of active working places in underground coal mines utilizing belt haulage entries. In addition, this section requires, by June 15, 2008, the Secretary of Labor to issue regulations, pursuant to the design criteria recommended by the National Institute of Occupational Safety and Health and the MINER Act, requiring installation of rescue chambers in the working areas of underground coal mines. The Committee has provided additional resources to ensure that these deadlines can be met.

The Committee also notes more than 130 proposals for new communication and tracking technology have been submitted since January 2006, yet MSHA has field tested 19 systems. In addition,

MSHA has received 51 applications since January 2006 for approval of communication and tracking systems, but 34 are still being reviewed. Additional resources have been provided under technical support to accelerate the testing of this technology and other equipment to improve the safety and health of miners.

The Committee recommendation includes an increase over the budget request of \$3,000,000 to strengthen the monitoring of training and improve the infrastructure at the National Mine Safety and Health Academy, which provides professional education and training services to the mining community. The GAO recently found that MSHA oversight of miner training is complicated by a number of factors, including inconsistent instructor approval standards and limited agency monitoring of training sessions. The additional funds should be used to address these deficiencies and ensure that the Academy is capable of keeping up with the training and professional education needs of the mining community.

The Committee recommendation also includes \$2,200,000 for an award to the United Mine Workers Association to provide classroom and simulated rescue training for mine rescue teams at its Beckley, West Virginia and Washington, Pennsylvania career centers (Funding for this program was requested by Senators Byrd and Specter). The Committee notes that a GAO report issued in May 2007 found that 81 percent of mine operators considered the availability of special training facilities for mine rescue team training in simulated environments to be a challenge. The recommendation also includes \$1,350,000 for an award to Wheeling Jesuit University in Wheeling, West Virginia for the National Technology Transfer Center to continue the coal slurry impoundment project (Funding for this program was requested by Senator Byrd).

BUREAU OF LABOR STATISTICS  
SALARIES AND EXPENSES

Appropriations, 2007 .....	\$548,123,000
Budget estimate, 2008 .....	574,443,000
Committee recommendation .....	560,000,000

The Committee recommends \$560,000,000 for this account. The comparable fiscal year 2007 amount is \$548,123,000 and the budget request includes \$574,443,000 for this purpose. The recommendation includes \$78,000,000 from the Employment Security Administration account of the unemployment trust fund, and \$482,000,000 in Federal funds. Language contained in the fiscal year 2006 bill is retained, pertaining to the Current Employment Survey.

The Bureau of Labor Statistics is the principal factfinding agency in the Federal Government in the broad field of labor economics.

The Committee recommendation includes \$1,000,000 to be used to conduct research studies on work-related injuries and illnesses. These studies, previously conducted by BLS, are important to employers, researchers and policymakers interested in preventing workplace injuries.

The Committee is interested in the progress being made on the minimum wage impact study required by section 8014 of the U.S. Troop Readiness, Veterans' Care, Katrina Recovery, and Iraq Ac-

countability Appropriations Act, 2007. The Committee requests the Bureau of Labor Statistics submit an interim report not later than 30 days after the date of enactment of this act on the methodology being applied to this study and the progress being made in meeting the required transmittal date.

The Committee recommendation includes \$5,000,000, which may be used to continue the Mass Layoff Statistics Program. The Committee bill also includes bill language continued from the fiscal year 2006 act which requires BLS to maintain the survey content issued prior to June 2005 with respect to the women worker series.

OFFICE OF DISABILITY EMPLOYMENT POLICY

Appropriations, 2007 .....	\$27,712,000
Budget estimate, 2008 .....	18,602,000
Committee recommendation .....	27,712,000

The Committee recommends \$27,712,000 for this account in 2008. The comparable fiscal year 2007 amount is \$27,712,000 and the budget request includes \$18,602,000 for this account. The Committee intends that at least 80 percent of these funds shall be used for demonstration and technical assistance grants to develop innovative and effective practices to increase the employment of youth and adults with disabilities.

Congress created the Office of Disability Employment Policy [ODEP] in the Department of Labor's fiscal year 2001 appropriation. Programs and staff of the former President's Committee on Employment of People with Disabilities [PCEPD] have been integrated into this office.

The Committee recommends that the Office of Disability Employment Policy continue and expand the existing, structured, internship program for undergraduate college students with disabilities. The Committee continues to believe that this structured internship program will provide important opportunities for undergraduate and graduate students with disabilities to pursue academic and career development opportunities within the Department of Labor and other Federal agencies.

The Committee is concerned by the lack of attention to the problem of underemployment of people with disabilities. The Committee is aware that over 50 million Americans have some kind of disability, representing 17 percent of our population. Many of these individuals, particularly those with intellectual disabilities, would benefit from the social interaction and the physical demands of full-time employment, but their disability is such that they could not be employed in an occupation that is compensated highly enough to cover the medical expenses and supportive services they need to survive. While some disabilities resulting from injuries can change with time, many developmental disabilities are permanent in nature. The Committee believes that the U.S. Government would benefit from the additional tax dollars generated by the additional employment, as well as the prevention of chronic illnesses in this population that can come from the physical and emotional benefits of work. Therefore, the Committee directs the Office of Disability Employment Policy to undertake a study on underemployment for individuals with disabilities. The study should include: the number of individuals on Federal disability benefit programs who are cur-

rently underemployed; an analysis of the types of disabilities these individuals represent; an examination of the categories of disability which would leave the individual with the capacity to work full time but without the earning potential to sustain him or herself; the estimated economic impact of full-time work for these Americans assuming they were allowed to keep all or a portion of their benefits, including an estimation of the economic impact to the Government and the benefit funds themselves; and finally an analysis of the health impact of full-time work on those populations including the cost savings to health benefit programs.

DEPARTMENTAL MANAGEMENT  
SALARIES AND EXPENSES

Appropriations, 2007 .....	\$298,920,000
Budget estimate, 2008 .....	254,236,000
Committee recommendation .....	313,718,000

The Committee recommendation includes \$313,718,000 for this account. The comparable fiscal year 2007 amount is \$298,920,000 and the budget request includes \$254,236,000 for this purpose. In addition, an amount of \$24,785,000 is available by transfer from the black lung disability trust fund.

The primary goal of the Department of Labor is to protect and promote the interests of American workers. The departmental management appropriation finances staff responsible for formulating and overseeing the implementation of departmental policy and management activities in support of that goal. In addition, this appropriation includes a variety of operating programs and activities that are not involved in departmental management functions, but for which other salaries and expenses appropriations are not suitable.

The Committee recommendation includes \$28,680,000 for Executive Direction. The comparable fiscal year 2007 amount is \$28,189,000 and the budget request includes \$28,680,000.

The Committee recommendation includes \$10,300,000 for the Women’s Bureau. The comparable fiscal year 2007 funding level is \$9,666,000 and the budget request includes \$9,832,000 for the bureau. The recommendation includes sufficient funds to increase support for resources, technical assistance and trainings to help women enter, re-enter and advance in the workforce.

The Committee is disappointed that the Department of Labor has once again proposed a budget that drastically reduces funding for International Labor Affairs Bureau [ILAB], in particular, those initiatives working with the International Labor Organization [ILO] to combat abusive and exploitative child labor.

The Committee is pleased by findings contained in the ILO report entitled “The End of Child Labor: Within Reach,” which was released in May 2006. The report stated that child labor is in decline worldwide, in large part because of the programs advanced by this Committee. Between 2000 and 2004, the number of child laborers worldwide fell by 11 percent, from 246 million to 218 million. Moreover, the number of children and youth aged 5–17 trapped in hazardous work decreased by 26 percent, and for the age group of 5–14 years, the decline in hazardous work was even

steeper, at 33 percent. It is a testament to the importance of the programs administered by the International Labor Affairs Bureau [ILAB], which this Committee has consistently supported. For over the past decade, the International Labor Affairs Bureau has built up a staff of professional experts with a knowledge base on the issue of exploitative child labor that is unrivaled in any other U.S. government agency.

Clearly, these programs administered by ILAB are having a positive impact and the Committee feels strongly that reducing United States efforts to eradicate child labor or substantially changing the structure and leadership of those efforts would, at best, endanger the progress being made. At worse, withdrawing from these efforts could damage the credibility and reputation of the United States in the countries whose governments are real partners to the United States in this effort.

The Committee is aware that the administration is aggressively pursuing multiple trade agreements that promise technical assistance on labor standards, including but not limited to the eradication of child labor. ILAB is the division of the U.S. Government with the mission and authority to provide that assistance. Given the aggressive trade agenda and the recent commitment to capacity building in developing nations as a form of aid, the Committee is mystified by the Department's now annual effort to eliminate these programs, this year proposing an astounding 80 percent reduction.

Therefore, the Committee recommendation includes \$82,516,000 for the Bureau of International Labor Affairs. Of this amount, the Committee directs \$42,610,000 be used for the United States contribution to expand on the successful efforts of the ILO's International Program for the Elimination of Child Labor [IPEC] (Funding for this program was requested by Senator Harkin).

Also included is \$26,770,000 to help ensure access to basic education for the growing number of children removed from the worst forms of child labor in impoverished nations where abusive and exploitative child labor is most acute. The Committee expects the Department of Labor to work with the governments of host countries to eliminate school fees that create a barrier to education.

The Committee notes that ILAB is statutorily required to compile and report to the Congress annually on the extent to which each foreign country that has trade and investment agreements with the United States enforces internationally-recognized worker rights. This report is required under multiple U.S. laws and promotes core labor standards as embodied in the ILO Declaration on Fundamental Principles and Rights at Work as adopted and reaffirmed in 1998. The Committee once again directs the Secretary to include in the 2008 report, all former GSP recipients that have achieved a Free Trade Agreement with the United States over the preceding year.

The Committee directs the Secretary to establish an annual non-monetary award recognizing the extraordinary efforts by an individual, company, organization or national government toward the reduction of the worst forms of child labor. The award shall be named, "the United States Department of Labor's Iqbal Masih Award for the Elimination of Child Labor." Iqbal Masih was a Pakistani carpet weaver sold into slavery at age four. He escaped from

his servitude at age 12 and became an outspoken advocate against child slavery. He told the world of his plight when he received the Reebok Human Rights Award in 1994. He was tragically killed a year later at the age of 13 in his native Pakistan.

The Committee requests an operating plan to be prepared by ILAB and provided to the Committee not later than 30 days after the date of enactment of this act which details the staffing requirements to meet statutory monitoring, oversight and reporting responsibilities of ILAB. In carrying out these responsibilities, the Committee expects ILAB to limit its practice of deducting salaries from funds intended for grant programs and establish cost effective practices for meeting its mission.

The Committee recommends \$95,162,000 for the Office of the Solicitor. The comparable fiscal year 2007 funding level is \$85,488,000 and the budget request includes \$95,162,000 for this purpose. The Committee intends for the increase provided to support no less than an increase of 19 FTEs over the fiscal year 2007 staffing level for enforcement support for the Mine Safety and Health Administration.

OFFICE OF JOB CORPS

Appropriations, 2007 .....	\$1,578,277,000
Budget estimate, 2008 .....	1,522,372,000
Committee recommendation .....	1,659,872,000

For Job Corps, the Committee recommends \$1,659,872,000. The comparable fiscal year 2007 amount is \$1,578,277,000 and the budget request includes \$1,522,372,000 for this purpose. The recommendation includes \$28,872,000 for Federal administrative expenses, for 188 full-time equivalent positions. The budget request and comparable fiscal year 2007 level include these administrative costs in the ETA Program Administration account.

The Senate recommendation for operations of job corps centers is \$1,516,000,000, comprised of \$925,000,000 in fiscal year 2008 funds, and \$591,000,000 in advance appropriations from last year's bill. For operations, the Committee also recommends advance funding of \$591,000,000, which will become available on October 1, 2008.

In response to this Committee's direction to competitively select sites for an expansion of Job Corps Centers, the Department of Labor selected three new Job Corps Center sites in February 2007. The Committee includes an additional \$15,000,000 to continue development of these facilities on the timelines provided to the Committee and selected sites. The Committee requests the Department of Labor to include in its fiscal year 2009 budget justification an analysis of the future funding needs for the new centers and a status report on the progress being achieved toward meeting each of the centers opening dates. In addition, \$100,000,000 in construction, rehabilitation and acquisition funds are provided in advance funding, which will make these funds available on October 1, 2008 through June 30, 2011.

The Committee recommendation continues the Office of Job Corps as an independent entity reporting to the Office of the Secretary of Labor, retaining program functions previously administered by the Job Corps prior to its transfer from the Employment

and Training Administration, and ensuring the support necessary for oversight and management responsibilities. Although the Office of the Assistant Secretary for Administration and Management will oversee the procurement process, this arrangement shall not alter the existing authorities, duties or activities of Job Corps as it existed prior to the transfer. The Office of Job Corps and the Assistant Secretary for Administration and Management are directed to maintain controls to assure the procurement activities are completely separate from program operations. The budget request recommends returning the Job Corps program to the Employment and Training Administration.

The Committee has recognized over the years the quality academic and vocational services Job Corps has provided to over 2 million economically disadvantaged youth. Currently, Job Corps has the capacity to serve 1 percent of the over 6 million youth in our country that have been left behind by traditional education programs. The Committee has also recognized and responded to this growing service gap by mandating an expansion of the program in new communities in fiscal year 2006 and fiscal year 2007. The Committee rejects the Department of Labor's proposal to reduce Job Corps student training slots by over 4,300. Rather, the Committee includes sufficient funding to maintain student services at the existing 122 Job Corps centers, as well as to operate any new centers. This funding will ensure that determined young people wanting to participate in Job Corps will not be turned away from an opportunity to become successful and self-sufficient members of their communities.

The Committee urges the Department to work with the Job Corps contractor community, employers and unions to ensure that the training slot level mandated by this act is used efficiently and effectively toward meeting the goal of expanding services to eligible youth. In particular, the Committee notes the fragmentation of contracts for outreach and admissions, from operations, and placement which could make it difficult for centers to utilize fully available training slots and meet their performance goals. Therefore, the Committee requests the Department to report in the fiscal year 2009 budget justification actions proposed and taken that will enhance the ability of centers to meet their performance goals.

Given that so few of the eligible Job Corps population is served currently, the Committee recognizes the need for additional Job Corps centers, particularly in rapidly growing metropolitan areas without a Job Corps center. Many of these communities have high numbers of eligible youth and are forced to export students to other Job Corps centers. The Committee anticipates providing additional funding in the future to begin the process of establishing new Job Corps centers in large urban areas currently without one. Therefore, the Committee requests that the Department be prepared during the fiscal year 2009 budget process to consider ways to structure and announce a competition for new Job Corps center sites meeting the priority areas discussed in this paragraph.

The Committee is aware of the Department of Labor's new initiative to increase the number of Job Corps graduates entering post-secondary education. While the Committee agrees that it is a worthwhile goal to increase the number of Job Corps graduates

going on to higher education, it is also aware of the challenge facing Job Corps students who need access to student financial aid programs. Therefore, the Committee directs the Office of Job Corps and the Department of Education's Federal Student Aid Office to explore possible approaches to increasing awareness of and preparedness for Job Corps students and graduates to enter postsecondary education programs and benefit from assistance available through Federal grant, loan and work-study programs. The Committee directs the Departments of Labor and Education to provide a letter report not later than 30 days after the date of enactment of this act on the steps that can be taken by each Department.

VETERANS EMPLOYMENT AND TRAINING

Appropriations, 2007 .....	\$223,189,000
Budget estimate, 2008 .....	228,096,000
Committee recommendation .....	228,198,000

The Committee recommends \$228,198,000 for this account, including \$31,055,000 in general revenue funding and \$197,143,000 to be expended from the Employment Security Administration account of the unemployment trust fund.

For State grants the bill provides \$161,894,000 which includes funding for the Disabled Veterans Outreach Program and the Local Veterans Employment Representative Program.

For Federal administration, the Committee recommends \$33,282,000. The Committee supports the concept of the Transition Assistance Program administered jointly with the Department of Defense which assists soon-to-be-discharged service members in transitioning into the civilian work force and includes funding to maintain this effective program.

Individuals leaving the military may be at high risk of homelessness due to a lack of job skills transferable to the civilian sector, disrupted or dissolved family and social support networks, and other risk factors that preceded their military service. The Committee expects the Secretary of Labor to ensure that a module on homelessness prevention is added to the Transition Assistance Program curriculum. The module should include a presentation on risk factors for homelessness, a self-assessment of risk factors, and contact information for preventative assistance associated with homelessness.

The Committee recommends \$1,967,000 for the National Veterans Training Institute [NVTI]. This Institute provides training to the Federal and State staff involved in the direct delivery of employment and training related services to veterans.

The Committee recommends \$23,620,000 for the Homeless Veterans Program. The Committee also recommends \$7,435,000 for the Veterans Workforce Investment Program, the same as the budget request.

OFFICE OF THE INSPECTOR GENERAL

Appropriations, 2007 .....	\$72,766,000
Budget estimate, 2008 .....	78,658,000
Committee recommendation .....	79,658,000

The Committee recommends \$79,658,000 for this account. The bill includes \$73,929,000 in general funds and authority to transfer

\$5,729,000 from the Employment Security Administration account of the unemployment trust fund. In addition, an amount of \$335,000 is available by transfer from the black lung disability trust fund. This level provides sufficient resources to cover built-in cost increases, as well as augmenting program accountability activities and expanding the labor racketeering program.

The Office of the Inspector General [OIG] was created by law to protect the integrity of departmental programs as well as the welfare of beneficiaries served by those programs. Through a comprehensive program of audits, investigations, inspections, and program evaluations, the OIG attempts to reduce the incidence of fraud, waste, abuse, and mismanagement, and to promote economy, efficiency, and effectiveness.

#### GENERAL PROVISIONS

General provision bill language is included to:

Provide for limiting use of Job Corps funding for compensation of an individual that is not a Federal employee at a rate in excess of Executive Level I (sec. 101).

Provide for general transfer authority (sec. 102).

Prohibit funding for the procurement of goods and services utilizing forced or indentured child labor in industries and host countries already identified by the Labor Department in accordance with Executive Order 13126 (sec. 103).

Authorize funds to be appropriated for job training for workers involved in construction projects funded through the Denali Commission (sec. 104).

Require the Labor Department to report to the Committees on Appropriations on the projects awarded under research and demonstration projects (sec. 105).

Require the Secretary to award competitively funds available in this act for Community College Initiative Grants, Community-Based Job Training Grants, and grants for job training for employment in high growth industries (sec. 106).

Prohibit the Secretary from finalizing or implementing any proposed regulation under the Workforce Investment Act, Wagner-Peyser Act or the Trade Adjustment Assistance Reform Act until such time as such legislation is enacted (sec. 107).

Prohibit the Secretary from taking any action to alter the procedure for redesignating local areas under subtitle B of title I of the Workforce Investment Act (sec. 108).

Prohibit the Department of Labor from using funds under this or any other appropriations act to carry out a public-private competition or direct conversion under Office of Management and Budget circular A-76 until 60 days after the Committees on Appropriations of the House of Representatives and Senate receive a report from the Government Accountability Office on the use of competitive sourcing at the Department of Labor (sec. 109).

Requires the Secretary of Labor to revise regulations related to the use of belt haulage entries to ventilate active working places of underground coal mines without prior approval from the Assistant Secretary of Labor and to issue regulations requiring installation of rescue chambers in the working areas of underground coal mines (sec. 110).

Limit compensation from Federal funds to a rate not greater than Executive Level II for any recipient or subrecipient of funds under the heading, "Employment and Training Administration" (sec. 111).

TITLE II  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
HEALTH RESOURCES AND SERVICES ADMINISTRATION  
HEALTH RESOURCES AND SERVICES

Appropriations, 2007 .....	\$6,415,702,000
Budget estimate, 2008 .....	5,820,805,000
Committee recommendation .....	6,868,673,000

The Committee provides a program level of \$6,868,673,000 for the Health Resources and Services Administration [HRSA]. The Committee recommendation includes \$6,843,673,000 in budget authority and an additional \$25,000,000 via transfers available under section 241 of the Public Health Services Act. The fiscal year 2007 comparable program level was \$6,415,702,000 and the budget request for fiscal year 2008 was \$5,820,805,000.

Health Resources and Services Administration activities support programs to provide health care services for mothers and infants; the underserved, elderly, homeless; migrant farm workers; and disadvantaged minorities. This appropriation supports cooperative programs in community health, AIDS care, health care provider training, and health care delivery systems and facilities.

BUREAU OF PRIMARY HEALTH CARE  
COMMUNITY HEALTH CENTERS

The Committee provides \$2,238,039,000 for the community health centers program. The fiscal year 2007 comparable program level was \$1,988,039,000 and the budget request for fiscal year 2008 was \$1,988,467,000. This group of programs includes community health centers, migrant health centers, health care for the homeless, and public housing health service grants. The Committee continues to strongly support the ongoing effort to increase the number of people who have access to medical services at health centers, and notes that this program receives one of the largest increases in funding in the Committee recommendation.

Within the amount provided, \$40,000,000 has been allocated to offset the rising cost of health care at existing centers and to resolve specific financial situations beyond the control of the local health center, such as unusual increases in the number of uninsured patients seeking care.

Within the amount provided, the Committee has provided \$44,055,000 under the Federal Tort Claims Act for the Health Centers program. The Committee has included bill language making this funding available until expended and allowing costs associated with the health centers tort liability relief program to be paid from the fund. The Committee intends that the fund be used to pay

judgments and settlements, occasional witness fees and expenses, and the administrative costs of the program, which includes the cost of evaluating claims, defending claims, and conducting settlement activities. The Committee is aware of legislation that would extend FTCA coverage to volunteer physicians and non-grantee health centers, as well as to health centers and their employees traveling to provide care in emergency-affected areas. While these proposals would extend FTCA coverage to additional providers, the Committee expects the amount provided to be adequate to cover any increased costs in fiscal year 2008.

The Committee supports continued efforts to expand the Health Centers program into those areas of the country with high poverty and no current access to a health center. The Committee urges HRSA to implement such an expansion to address the lack of access in the neediest communities of the country, and that eligibility for new funding not be limited to certain geographic areas, such as counties. The Committee directs HRSA to expedite awards to new access points by funding sufficiently high-scoring applications from the fiscal year 2007 cycle that were left unfunded.

Further, the Committee urges HRSA to make funding available to increase capacity at existing centers, and for service expansion awards adding mental health services, dental services, and pharmacy services at community health centers. The Committee expects HRSA to implement any new expansion initiative using the existing, and statutorily-required, proportionality for urban and rural communities, as well as migrant, homeless and public housing health centers.

The Committee believes that adequate funding for the technical assistance and networking functions available for health centers is critical to the successful operation and expansion of the Health Centers program. Funds are available within the amount provided to continue assistance to existing centers and support expansion to new communities.

The Committee strongly urges HRSA to assist rural communities in high-need areas of the country that have not fully participated in the Health Center expansion effort in recent years. Despite documented need, many eligible counties have not received health center grants. The focus on financial viability and regionally specific criteria, such as homeless populations and migrant workers, has sometimes held back communities outside of the targeted demographic. The Committee notes that very high poverty and extremely underserved rural areas experience significant challenges in getting resources together to form a successful application. The Committee urges HRSA to provide technical assistance and consider funding planning grants to potential new access point grantees to enable them to better compete for health center awards.

The Committee recognizes the important role of the consolidated health centers in caring for people living with or at risk for hepatitis C. The Committee encourages HRSA to increase health centers' capacity for delivery of medical management and treatment of HCV by implementing training and technical assistance initiatives, so that health centers are able to increase hepatitis C counseling and testing, and medical management and treatment services to meet the healthcare priorities of their respective communities.

The Committee continues to be concerned that community health center funds are often not available to small, remote communities because the population base is too small. Many of these communities have no health service providers and are forced to travel long distances by boat or plane even in emergency situations. The Committee recommends that HRSA examine its regulations and applications procedures to ensure they do not unduly burden small communities and are appropriately flexible to meet the needs of these communities. The Committee applauds the agency for its Frontier Health Plan initiative, and encourages the agency to continue and expand its efforts with this program.

The Committee recognizes the importance of increasing the use of health information technology [IT] at health centers. Health centers have demonstrated improved access to services and improved patient outcomes by using electronic health records and other IT tools through their participation in various networks, projects, systems, and collaboratives. The Committee urges HRSA to ensure that health centers have adequate resources to establish and expand health IT systems to further enhance the delivery of cost-effective, quality health care services.

The Committee recognizes the service to the uninsured by Integrated Health Centers [IHCs] and Nurse-Managed Health Centers [NMHCs]. These nonprofit hospital-affiliated or university-based health centers provide much needed primary care to a diverse and disadvantaged population. These health centers are frequently the only source of primary care to their patients. The Committee encourages HRSA to explore options to include IHCs and NMHCs in new public-private safety net partnerships thereby increasing access for the medically underserved and increase the clinical education sites to increase nurse education. Specifically, the Committee encourages HRSA to explore granting these health centers the ability to apply for FQHC Look-Alike status.

The Committee does not provide additional funds for loan guarantee authority under section 330(d) of the Public Health Service Act. The Committee notes that \$70,000,000 of the \$160,000,000 appropriated in fiscal years 1997 and 1998 continues to remain available for guarantees of both loan principal and interest. The Committee notes that some health centers have successfully used funds available through the HRSA Loan Guarantee Program to meet their capital needs. To maximize the use of the loan guarantee funds, the Committee urges HRSA to increase the percentages at which loan guarantees are provided for managed care plans, networks, and facilities to the highest authorized levels.

#### *Native Hawaiian Health Care*

The Committee again includes the legal citation in the bill for the Native Hawaiian Health Care Program. The Committee has included sufficient funding so that health care activities funded under the Native Hawaiian Health Care Program can be supported under the broader community health centers line. The Committee expects that not less than \$14,200,000 be provided for these activities in fiscal year 2008 (This funding was requested by Senators Inouye and Akaka).

The Committee is pleased with the administration's response and recognition of the island designation and seeks continued support in meeting the unique health care access challenges innate to clinics, Federally qualified health centers or hospitals located on these islands. The Committee recognizes there are still few Native Hawaiian health care administrators working in Federally qualified health centers. The Committee directs that a portion of the funds appropriated for Native Hawaiian Health Care Act programs be used to develop administrative competency curriculum to prepare Native Hawaiians with the expertise necessary to succeed in these positions.

The Committee recognizes that there has been a rapid growth in the emerging Hispanic population of Hawaii and such may necessitate new training requirements for healthcare providers and educators in areas of cultural awareness and language.

*Free Clinics Medical Malpractice Coverage*

The Committee provides \$40,000 in funding for payments of claims under the Federal Tort Claims Act to be made available for free clinic health professionals as authorized by U.S.C. title 42, section 233(o) of the Public Health Service Act. The fiscal year 2007 comparable level was \$41,000 and the fiscal year 2008 budget request included \$100,000 for this program. This appropriation continues to extend Federal Tort Claims Act coverage to medical volunteers in free clinics in order to expand access to health care services to low-income individuals in medically underserved areas.

*National Hansen's Disease Program*

The Committee has included \$16,500,000 for the National Hansen's Disease Program. The fiscal year 2007 comparable level was \$15,972,000 and the budget request for fiscal year 2008 was \$16,109,000. The program consists of inpatient, outpatient, long-term care, training, and research in Baton Rouge, Louisiana; a residential facility at Carville, Louisiana, and 11 outpatient clinic sites in the continental United States and Puerto Rico.

*National Hansen's Disease Program Buildings and Facilities*

The Committee provides \$220,000 for buildings and facilities. The fiscal year 2007 comparable level was \$220,000 and the budget request for fiscal year 2008 was \$100,000 for this program. This funding provides for the repair and maintenance of buildings at the Gillis W. Long Hansen's Disease Center.

*Payment to Hawaii for Hansen's Disease Treatment*

The Committee provides \$1,996,000 for Hansen's Disease services. The fiscal year 2007 comparable level was \$1,996,000 and the budget request for fiscal year 2008 was \$1,976,000. Payments are made to the State of Hawaii for the medical care and treatment of persons with Hansen's Disease in hospital and clinic facilities at Kalaupapa, Molokai and Honolulu. Expenses above the level of appropriated funds are borne by the State of Hawaii.

## BUREAU OF HEALTH PROFESSIONS

*National Health Service Corps: Field Placements*

The Committee provides \$40,443,000 for field placement activities. The fiscal year 2007 comparable level was \$40,443,000 and the budget request for fiscal year 2008 was \$30,729,000. The funds provided for this program are used to support the activities of National Health Service Corps in the field, including travel and transportation costs of assignees, training and education, recruitment of volunteers, and retention activities. Salary costs of most new assignees are paid by the employing entity.

The Committee is pleased by the increasing proportion of National Health Service Corps assignees being placed at Community, Migrant, Homeless, and Public Housing Health Centers. The Committee encourages HRSA to further expand this effort to ensure that health centers have access to sufficient numbers of health professionals through the Corps.

The Committee is concerned that the current Health Professional Shortage Area [HPSA] scoring process used by HRSA disadvantages many health centers located in medically underserved areas of the country. The Committee urges HRSA to apply the same placement criteria to physicians seeking J-1 Visa Waivers and NHSC Scholars as are currently applied to NHSC Loan Repayment recipients. The Committee is concerned that the recent decline in J-1 Visa Waiver applicants is due to systemic obstacles, including HPSA scoring minimums, rather than diminishing needs in underserved communities. To ensure that the number and location of the placements meets the needs of the underserved, the Committee urges HRSA to expand eligibility for the J-1 visa waiver program.

*National Health Service Corps: Recruitment*

The Committee provides \$85,230,000 for recruitment activities. The fiscal year 2007 comparable level was \$85,230,000 and the budget request for fiscal year 2008 was \$85,230,000. This program provides major benefits to students (full-cost scholarships or sizable loan repayment) in exchange for an agreement to serve as a primary care provider in a high priority Federally designated health professional shortage area. These funds should support multi-year, rather than single-year, commitments.

## HEALTH PROFESSIONS

The Committee provides \$357,425,000 for all HRSA health professions programs. The fiscal year 2007 comparable level was \$334,425,000 and the budget request for fiscal year 2008 was \$115,040,000.

*Training for Diversity**Centers of Excellence*

The Committee provides \$11,880,000 for the Centers of Excellence program. The fiscal year 2007 comparable level was \$11,880,000 and the budget request for fiscal year 2008 did not include any funds for this program. This program was established to fund institutions that train a significant portion of the Nation's mi-

minority health professionals. Funds are used for the recruitment and retention of students, faculty training, and the development of plans to achieve institutional improvements. The institutions that are designated as centers of excellence are private institutions whose mission is to train disadvantaged minority students for service in underserved areas. Located in poor communities and usually with little State funding, they serve the health care needs of their patients, often without payment.

The Committee is pleased that HRSA has re-focused the Minority Centers of Excellence program on providing support to historically minority health professions institutions. The Committee recognizes the important role of this program in supporting faculty and other academic programs at minority institutions. The Committee notes that at the level of funding provided, Public Law 105-392, the Health Professions Education Partnerships Act of 1998, limits funding to the original four Centers of Excellence.

#### *Health Careers Opportunity Program*

The Committee provides \$3,960,000 for the Health Careers Opportunity Program. The fiscal year 2007 comparable level was \$3,960,000 and the budget request for fiscal year 2008 did not include any funds for this program. This program provides funds to medical and other health professions schools for recruitment of disadvantaged students and pre-professional school preparations.

For fiscal year 2008, the Committee strongly urges HRSA to give priority consideration to awarding grants to those institutions with a historic mission of training minorities in the health professions.

#### *Faculty Loan Repayment*

The Committee provides \$1,289,000 for the Faculty Loan Repayment program. The fiscal year 2007 comparable level was \$1,289,000 and the budget request for fiscal year 2008 did not include any funds for this program. This program provides for the repayment of education loans for individuals from disadvantaged backgrounds who are health professions students or graduates, and who have agreed to serve for not less than 2 years as a faculty member of a health professions school.

#### *Scholarships for Disadvantaged Students*

The Committee provides \$46,657,000 for the Scholarships for Disadvantaged Students program. The fiscal year 2007 comparable level was \$46,657,000 and the budget request for fiscal year 2008 was \$9,733,000. This program provides grants to health professions schools for student scholarships to individuals who are from disadvantaged backgrounds and are enrolled as full-time students in such schools.

#### *Training in Primary Care Medicine and Dentistry*

The Committee provides \$48,851,000 for Training in Primary Care Medicine and Dentistry programs. The fiscal year 2007 comparable level was \$48,851,000 and the budget request for fiscal year 2008 did not include any funding for this program. The Committee has included bill language funding family medicine activi-

ties at \$24,614,000; the general dentistry program at \$5,000,000; and the pediatric dentistry program at \$5,000,000.

Even though it is most easily preventable, dental decay is the most common chronic childhood disease in the United States—five times more common than asthma. When dental problems go untreated, the proximity to the brain can lead to fatal conditions.

*Interdisciplinary, Community-based Linkages*

*Area Health Education Centers*

The Committee provides \$28,681,000 for the Area Health Education Centers program. The fiscal year 2007 comparable level was \$28,681,000 and the budget request for fiscal year 2008 did not include any funds for this program. This program links university health science centers with community health service delivery systems to provide training sites for students, faculty, and practitioners. The program supports three types of projects: Core grants to plan and implement programs; special initiative funding for schools that have previously received Area Health Education Centers [AHEC] grants; and model programs to extend AHEC programs with 50 percent Federal funding.

*Allied Health and Other Disciplines*

The Committee provides \$5,960,000 for the Allied Health and Other Disciplines program. The fiscal year 2007 comparable level was \$3,960,000 and the budget request for fiscal year 2008 did not include any funds for this program. These programs seek to improve access, diversity, and distribution of allied health practitioners to areas of need. The program improves access to comprehensive and culturally competent health care services for underserved populations. The Committee recommendation is sufficient to continue the Chiropractic-Medical School Demonstration Grant and Graduate Psychology training programs at the same levels as in fiscal year 2007.

Within the funds provided, the Committee has included \$2,000,000 for the dental workforce programs authorized under section 340G of the Public Health Service Act. The fiscal year 2007 level of \$2,000,000 was appropriated in Program Management and the fiscal year 2008 budget did not request any funds for this purpose.

The Graduate Psychology Education Program provides interdisciplinary training for health service psychologists to offer mental and behavioral health care services to underserved populations, such as older adults, children, chronically ill persons and victims of abuse or trauma. While being trained in both rural and urban communities, trainees also provide direct services to those who would otherwise not receive them.

*Public Health Workforce Development*

With the continued need for public health training throughout the country, the Committee believes these programs serve an important role in maintaining the country's public health infrastructure.

*Public Health, Preventive Medicine, and Dental Public Health Programs*

The Committee provides \$8,920,000 for these programs. The fiscal year 2007 comparable level was \$7,920,000 and the budget request for fiscal year 2008 did not include any funds for this program. This program supports awards to schools of medicine, osteopathic medicine, public health, and dentistry for support of residency training programs in preventive medicine and dental public health; and for financial assistance to trainees enrolled in such programs.

*Nursing Workforce Development Programs*

The Committee provides \$169,679,000 for the Nursing Workforce Development programs. The fiscal year 2007 comparable level was \$149,679,000 and the budget request for fiscal year 2008 was \$105,307,000. The Committee recognizes that the current nursing shortage has reached a crisis state across America. The situation only promises to worsen due to a lack of young nurses in the profession, an aging existing workforce, and inadequate availability of nursing faculty to prepare future nurses. The Committee urges HRSA to support programs aimed at increasing nursing faculty and encouraging a diverse population's entry into nursing.

*Advanced Education Nursing*

The Committee provides \$68,889,000 for the Advanced Education Nursing programs. The fiscal year 2007 comparable level was \$57,061,000 and the administration did not request funding for this program in fiscal year 2008. This program funds nursing schools to prepare nurses at the master's degree or higher level for teaching, administration, or service in other professional nursing specialties. Within the allocation, the Committee encourages HRSA to allocate funding at least at the fiscal year 2007 level for nurse anesthetist education.

*Nurse Education, Practice, and Retention*

The Committee provides \$37,291,000 for the Nurse Education, Practice, and Retention programs. The fiscal year 2007 comparable level and the budget request for fiscal year 2008 were \$37,291,000. The nurse education, practice and retention program is a broad authority with targeted purposes under three priority areas—education, practice and retention—in response to the growing nursing shortage. The Committee encourages HRSA to incorporate innovative methods, such as competitive grants for competency-based distance learning technologies, to increase the number of trained nurses in the field. The goal of this program is to improve the quality of nursing practice. Activities under this program will initiate new projects that will change the educational mix of the nursing workforce and empower the workforce to meet the demands of the current health care system.

*Nursing Workforce Diversity*

The Committee provides \$16,107,000 for the Nursing Workforce Diversity program. The fiscal year 2007 comparable level was \$16,107,000 and the budget request for fiscal year 2008 was

\$16,107,000. The goal of this program is to improve the diversity of the nursing workforce through increased educational opportunities for individuals from disadvantaged backgrounds.

*Nurse Loan Repayment and Scholarship Program*

The Committee provides \$36,000,000 for the Nurse Loan Repayment and Scholarship programs. The fiscal year 2007 comparable level was \$31,055,000 and the budget request for fiscal year 2008 was \$43,744,000. This program offers student loan repayment to nurses in exchange for an agreement to serve not less than 2 years in an Indian Health Service health center, Native Hawaiian health center, public hospital, community or migrant health center, or rural health clinic.

*Comprehensive Geriatric Education*

The Committee provides \$3,392,000 for Comprehensive Geriatric Education grants. The fiscal year 2007 comparable level and the budget request for fiscal year 2008 were \$3,392,000. These grants prepare nursing personnel to care for the aging population.

*Nurse Faculty Loan Program*

The Committee provides \$8,000,000 for the Nursing Faculty Loan program. The fiscal year 2007 comparable level and the budget request for fiscal year 2008 were \$4,773,000. This program supports the development of a student loan fund in schools of nursing to increase the number of qualified nursing faculty.

*Children's Hospitals Graduate Medical Education Program*

The Committee has provided \$200,000,000 for the Children's Hospitals Graduate Medical Education [GME] program. The fiscal year 2007 comparable level was \$297,009,000 and the budget request for fiscal year 2008 was \$110,018,000.

The program provides support for health professions training in children's teaching hospitals that have a separate Medicare provider number ("free-standing" children's hospitals). Children's hospitals are statutorily defined under Medicare as those whose inpatients are predominantly under the age of 18. The funds in this program are intended to make the level of Federal Graduate Medical Education support more consistent with other teaching hospitals, including children's hospitals that share provider numbers with other teaching hospitals. Payments are determined by formula, based on a national per-resident amount. Payments support training of resident physicians as defined by Medicare in both ambulatory and inpatient settings.

*National Practitioner Data Bank*

The Committee provides \$18,900,000 for the national practitioner data bank. The fiscal year 2007 comparable level was \$16,200,000 and the budget request for fiscal year 2008 was \$18,900,000. The Committee and the budget request assume that full funding will be provided entirely through the collection of user fees and will cover the full cost of operating the data bank. Bill language is included to ensure that user fees are collected to cover all costs of processing requests and providing such information to data bank users.

*Health Care Integrity and Protection Data Bank*

The Committee provides \$3,825,000 for the health care integrity and protection data bank. The fiscal year 2007 comparable level was \$3,825,000 and the administration did not request funding for this program in fiscal year 2008. The Committee assumes that full funding will be provided entirely through the collection of user fees and will cover the full cost of operating the data bank. The data bank is intended to collect, maintain, and report on certain actions taken against health care providers, suppliers, and practitioners.

## MATERNAL AND CHILD HEALTH BUREAU

*Maternal and Child Health Block Grant*

The Committee provides \$673,000,000 for the maternal and child health [MCH] block grant. The fiscal year 2007 comparable level was \$673,000,000 and the budget request for fiscal year 2008 was \$673,000,000. The Committee is moving the appropriations for Leadership Education for Neurodevelopmental Disabilities and the Developmental-Behavioral Pediatrics Training Program from the SPRANS set-aside into a new line for Autism and related Development Disabilities. The Committee provided \$20,000,000 for these autism-related activities in fiscal year 2007.

The Maternal and Child Health Block Grant program provides a flexible source of funding that allows States to target their most urgent maternal and child health needs through development of community-based networks of preventive and primary care that coordinate and integrate public and private sector resources and programs for pregnant women, mothers, infants, children, and adolescents. The program supports a broad range of activities including prenatal care, well child services and immunizations, reducing infant mortality, preventing injury and violence, expanding access to oral health care, addressing racial and ethnic disparities and providing comprehensive care for children, adolescents, and families through clinics, home visits and school-based health programs.

The MCH block grant funds are provided to States to support health care for mothers and children. According to statute, 85 percent of appropriated funds up to \$600,000,000 are distributed to States and 15 percent are set aside for special projects of regional and national significance [SPRANS]. Also according to statute, 12.75 percent of funds over \$600,000,000 are to be used for community-integrated service systems [CISS] programs. The remaining funds over \$600,000,000 are distributed on the same 85/15 percent split as the basic block grant.

The Committee does not intend to cut grants to States or the grants for community integrated service systems. Therefore, the Committee has included a statutory provision to hold harmless both of these grant programs.

The Committee has included bill language identifying \$95,936,920 for the SPRANS set-aside. Within that total, the Committee intends that \$1,536,480 be used for a first-time motherhood education program; \$2,880,900 be used for epilepsy demonstration projects; \$990,000 be used for a fetal alcohol syndrome demonstration program; \$3,841,200 be used to continue the sickle cell newborn screening program and its locally based outreach and coun-

seling efforts; \$1,920,600 be used for newborn and child screening for heritable disorders as authorized in title XXVI of the Children's Health Act of 2000; and \$4,801,500 be used to continue the oral health demonstration programs and activities in the States.

As stated above, the Committee also provides \$1,536,480 for a first-time motherhood demonstration program, equally divided between urban and rural settings. Funding for urban settings should be focused on community-based doula activities. These funds may be used to improve infant health, strengthen families and provide supports to ensure family success through a community-based doula program. This approach identifies and trains indigenous community leaders to mentor pregnant women during the months of pregnancy, birth and the immediate post-partum period. Doulas provide pregnancy and childbirth education, early linkage to health care and social services, labor coaching, breastfeeding education and counseling and parenting skills while fostering parental attachment. Rural areas represent a unique challenge in supporting first-time mothers, particularly around the area of lactation support and services. Funding for the rural portion of the demonstration should be focused on the best ways of delivering supportive services, including delivery outside the hospital setting both before and after the birth of the child. Priority should be given to applications which emphasize breastfeeding initiation and retention.

As stated above, the Committee has provided \$2,880,900 for the continuation of epilepsy demonstration programs to improve access to health and other services regarding seizures and to encourage early detection and treatment in children and others residing in medically underserved and rural areas. The Committee is aware of the critical need for a public awareness campaign to increase seizure recognition.

As stated above, the Committee provides \$1,920,600 to continue the heritable disorders screening program authorized in title XXVI of the Children's Health Act of 2000. Newborn screening is used for early identification of infants affected by certain genetic, metabolic, hormonal and or functional conditions for which there are effective treatments or interventions. Screening detects disorders in newborns that, left untreated, can cause death, disability, mental retardation and other serious illnesses.

The Committee encourages HRSA to prioritize Fragile X as a key prototype in the development of cost-effective public health screening and genetic counseling programs. The Committee requests a report by July 1, 2008, on progress made in the development of a screening tool for Fragile X and encourages HRSA to work with the NICHD to work toward the inclusion of Fragile X in newborn screening programs.

As stated above, the Committee has provided \$4,801,500 for the continuation of oral health programs in the States. These programs will help States develop well integrated, quality oral health programs through grants, cooperative agreements, and contracts. As linkages continue to be made among disease transmissibility, maternal behaviors, poor birth outcomes and poor periodontal health, further program attention is warranted to avoid the need for more costly care.

The Committee recognizes the key role that Maternal and Child Health Centers for Leadership in Pediatric Dentistry Education provide in preparing dentists with dual training in pediatric dentistry and dental public health. The Committee encourages HRSA to provide incentives to the Centers to leverage resources and seek matching funds to strengthen center activities.

The Committee reiterates its long-standing support for the continuation of funding that the Maternal and Child Health Block Grant has provided to comprehensive thalassemia treatment centers under the SPRANS program. The Committee urges HRSA to continue this program.

The most crucial need for individuals suffering from chronic fatigue syndrome [CFS] is effective, compassionate medical care. HRSA has piloted effective ways of delivering health care services to underserved populations. CDC has identified that fewer than 20 percent of patients with CFS have been diagnosed by a health care professional, suggesting that this population is underserved. The Committee encourages HRSA to develop models for CFS clinical care with the goal of improving the diagnosis and management of individuals with CFS throughout our country.

The Committee recognizes the critical role of hemophilia treatment centers in providing needed comprehensive care for persons with bleeding disorders and the expanded role of these centers in addressing the needs of persons with bleeding disorders and clotting disorders. The Committee urges HRSA to continue its support of this model disease management network.

#### *Autism and Other Developmental Disorders*

The Committee provides \$37,000,000 for the autism and other developmental disorders initiative. The fiscal year 2007 comparable level was \$20,000,000 and the budget request for fiscal year 2008 was \$20,000,000. The program supports surveillance, early detection, education and intervention activities on autism and other developmental disorders, as authorized in the Combating Autism Act of 2006.

The Committee has included sufficient funding to continue and expand the Leadership Education in Neurodevelopmental and Related Disabilities [LEND] program, previously funded in the MCHB SPRANS account. These University-based programs provide long-term, graduate level interdisciplinary training as well as services and care for infants, children, and adolescents with disabilities.

#### *Sickle Cell Anemia Program*

The Committee provides \$3,180,000 for the sickle cell anemia demonstration program. The fiscal year 2007 comparable level was \$2,180,000 and the budget request for fiscal year 2008 was \$2,184,000.

#### *Traumatic Brain Injury Program*

The Committee provides \$10,000,000 for the traumatic brain injury program. The fiscal year 2007 comparable level was \$8,910,000 and the budget request for fiscal year 2008 did not include any funding for this program. The program supports implementation and planning grants to States for coordination and im-

provement of services to individuals and families with traumatic brain injuries as well as protection and advocacy. Such services can include: pre-hospital care, emergency department care, hospital care, rehabilitation, transitional services, education, employment, and long-term support. The Committee notes that brain injury is a signature injury of service in Iraq and that the returning National Guard soldiers rely on community-based systems of care. The Committee includes \$3,400,000 for protection and advocacy services, as authorized under section 1305 of Public Law 106-310.

#### *Healthy Start*

The Committee provides \$101,518,000 for the healthy start infant mortality initiative. The fiscal year 2007 comparable level was \$101,518,000 and the budget request for fiscal year 2008 was \$100,503,000.

The healthy start initiative was developed to respond to persistently high rates of infant mortality in this Nation. The initiative was expanded in fiscal year 1994 by a special projects program, which supported an additional seven urban and rural communities to implement infant mortality reduction strategies and interventions. The Children's Health Act of 2000 fully authorized this initiative as an independent program. The Committee urges HRSA to give preference to current and former grantees with expiring or recently expired project periods.

#### *Universal Newborn Hearing Screening and Early Intervention*

The Committee provides \$12,000,000 for universal newborn hearing screening and early intervention activities. The fiscal year 2007 comparable level was \$9,804,000 and the budget request for fiscal year 2008 did not include any funds for this program.

The Committee expects HRSA to coordinate projects funded with this appropriation with projects related to early hearing detection and intervention by the National Center on Birth Defects and Developmental Disabilities, the National Institute on Deafness and Other Communication Disorders, the National Institute on Disability and Rehabilitation Research, and the Office of Special Education and Rehabilitative Services.

#### *Emergency Medical Services for Children*

The Committee provides \$20,000,000 for emergency medical services for children. The fiscal year 2007 comparable level was \$19,800,000 and the budget request for fiscal year 2007 did not include funds for this program. The program supports demonstration grants for the delivery of emergency medical services to acutely ill and seriously injured children.

#### *Family-To-Family Health Information Centers*

The Committee has not provided funding for the Family-To-Family Health Information Centers program. The fiscal year 2007 comparable level was \$3,000,000 and the budget request for fiscal year 2008 included \$4,000,000 for this initiative. The Committee notes that the Deficit Reduction Act of 2005 appropriated \$4,000,000 for this activity in fiscal year 2008.

## HIV/AIDS BUREAU

## ACQUIRED IMMUNE DEFICIENCY SYNDROME

*Ryan White AIDS Programs*

The Committee provides \$2,170,919,000 for Ryan White AIDS programs. The recommendation includes \$25,000,000 in transfers available under section 241 of the Public Health Service Act. The fiscal year 2007 comparable level was \$2,137,795,000 and the budget request for fiscal year 2008 was \$2,157,912,000.

Next to the Medicaid program, the Ryan White AIDS programs are the largest Federal investment in the care and treatment of people living with HIV/AIDS in the United States. These programs provides a wide range of community-based services, including primary and home health care, case management, substance abuse treatment, mental health services, and nutritional services.

Within the total provided, the Committee intends that Ryan White AIDS activities that are targeted to address the growing HIV/AIDS epidemic and its disproportionate impact upon communities of color, including African-Americans, Latinos, Native Americans, Asian Americans, Native Hawaiians, and Pacific Islanders continue with at least the level of funding provided in fiscal year 2007.

The Committee is concerned that at least 25 percent of persons living with HIV are coinfecting with HCV, and that HCV-related complications are the leading cause of death among persons with HIV/AIDS. The Committee requests that HRSA provide additional guidance to grantees on providing services to coinfecting individuals, and more education and training to medical providers treating HIV/HCV coinfecting persons.

The recent Ryan White CARE Act reauthorization provides not less than 25 percent of available funds under titles I and II for “support services,” necessary for individuals with HIV/AIDS to achieve their medical outcomes. The Committee is aware that food and nutrition services—which have been provided under the Act since 1990—are essential to the comprehensive treatment of HIV/AIDS.

*Emergency Assistance*

The Committee provides \$603,993,000 for emergency assistance grants to eligible metropolitan areas disproportionately affected by the HIV/AIDS epidemic. The fiscal year 2007 comparable level was \$603,993,000 and the budget request for fiscal year 2008 included \$603,993,000. These funds are provided to metropolitan areas meeting certain criteria. Two thirds of the funds are awarded by formula and the remainder is awarded through supplemental competitive grants.

*Comprehensive Care Programs*

The Committee provides \$1,225,518,000 for HIV health care and support services. The fiscal year 2007 comparable level was \$1,195,500,000 and the budget request for fiscal year 2008 was \$1,215,518,000. These funds are awarded to States to support HIV service delivery consortia, the provision of home and community-

based care services for individuals with HIV disease, continuation of health insurance coverage for low-income persons with HIV disease and support for State AIDS drug assistance programs [ADAP].

The Committee continues to be encouraged by the progress of anti-retroviral therapy in reducing the mortality rates associated with HIV infection and in enhancing the quality of life of patients on medication. The Committee includes bill language providing \$814,546,000 for AIDS medications in the AIDS Drug Assistance Program [ADAP]. The fiscal year 2007 comparable level was \$789,546,000 and the budget request for fiscal year 2008 was \$814,546,000. The Committee has provided this increase to address the long-standing problem of State waiting lists for HIV/AIDS medications without unfairly punishing States that have provided their own resources to make up funding shortfalls.

The Committee is aware of the success HIV therapies have had on prolonging and enhancing the quality of life for those infected with HIV/AIDS. As the infected population lives longer and becomes increasingly resistant to current treatment regimens, there is a growing need to focus on access to newer therapies for treatment experienced or "later stage" patients. The Committee encourages HRSA and State ADAPs to prioritize coverage of treatments for later stage patients so that there is parity of access to effective treatments for patients across the HIV disease spectrum. The Committee further encourages State ADAPs to provide coverage of therapies approved by the FDA for the treatment of HCV in HIV/HCV co-infected patients.

#### *Early Intervention Services*

The Committee provides \$193,622,000 for early intervention grants. The fiscal year 2007 comparable level was \$193,722,000 and the budget request for fiscal year 2008 included \$199,821,000. These funds are awarded competitively to primary health care providers to enhance health care services available to people at risk of HIV and AIDS. Funds are used for comprehensive primary care, including counseling, testing, diagnostic, and therapeutic services.

#### *Children, Youth, Women, and Families*

The Committee provides \$75,000,000 for grants for coordinated services and access to research for women, infants, children and youth. The fiscal year 2007 comparable level and the budget request for 2008 were \$71,794,000. Funds are awarded to community health centers, family planning agencies, comprehensive hemophilia diagnostic and treatment centers, Federally qualified health centers under section 1905(1)(2)(B) of the Social Security Act, county and municipal health departments and other nonprofit community-based programs that provide comprehensive primary health care services to populations with or at risk for HIV disease.

The Committee has included increased funding to address the potential influx of new cases identified through the President's testing initiative funded through the Centers for Disease Control and Prevention. The Committee intends that 50 percent of the increase be used to increase the average title IV grant amount to increase capacity in the existing grantee network. The Committee notes that title IV funds may be used for a broad range of activities to reduce

mother-to-child transmission, including voluntary testing of pregnant women and treatment to reduce mother-to-child transmission.

Technical assistance may be provided to title IV grantees using up to 2 percent of the funds appropriated under this section. Within this amount sufficient funds exist to maintain technical assistance to title IV grantees and to conduct policy analysis and research.

#### *AIDS Dental Services*

The Committee provides \$13,086,000 for AIDS Dental Services. The fiscal year 2007 comparable level and the budget request for fiscal year 2008 were both \$13,086,000. This program provides grants to dental schools, dental hygiene schools, and postdoctoral dental education programs to assist with the cost of providing unreimbursed oral health care to patients with HIV disease.

#### *AIDS Education and Training Centers*

The Committee provides \$34,700,000 for the AIDS education and training centers [AETC's]. The fiscal year 2007 comparable level was \$34,700,000 and the budget request for fiscal year 2008 included \$28,700,000. AIDS education and training centers train health care practitioners, faculty, and students who care for AIDS patients outside of the traditional health professions education venues, and support curriculum development on diagnosis and treatment of HIV infection for health professions schools and training organizations. The targeted education efforts by AETC's are needed to ensure the cost-effective use of the significant expenditures in Ryan White programs and the AIDS drugs assistance program. The agency is urged to fully utilize the AETC's to ensure the quality of medical care and to ensure, as much as possible, that no individual with HIV receives suboptimal therapy due to the lack of health care provider information.

### HEALTH CARE SYSTEMS BUREAU

#### *Organ Donation and Transplantation*

The Committee provides \$25,049,000 for organ donation and transplantation activities. The fiscal year 2007 comparable level and the budget request for fiscal year 2008 were both \$23,049,000. These funds support a scientific registry of organ transplant recipients and the National Organ Procurement and Transplantation Network to match donors and potential recipients of organs. A portion of the appropriated funds may be used for education of the public and health professionals about organ donations and transplants, and to support agency staff providing clearinghouse and technical assistance functions.

The Committee applauds the efforts of the Division of Transplantation to implement the new provision of Public Law 108-116, the Organ Donation and Recovery Improvement Act which provides for reimbursement of travel and subsistence expenses of living organ donors. The Committee strongly supports this means of increasing the rate of successful transplantations and has provided \$2,000,000 over the budget request to continue this program.

The Committee commends HRSA for its leadership in promoting increased organ and tissue donations, however the Committee is concerned with recent funding reductions for research and demonstration projects that have historically led to increased organ donation and encourages HRSA to restore these programs.

*National Cord Blood Inventory*

The Committee has provided \$12,000,000 for the National Cord Blood Inventory, which is the successor of the National Cord Blood Stem Cell Bank program. The fiscal year 2007 comparable level was \$3,960,000 and the budget request for fiscal year 2008 was \$1,966,000. The purpose of this program is to provide funds to cord blood banks to build an inventory of the highest quality cord blood units for transplantation.

The Committee is pleased that the first cohort of banks has been established and has included sufficient funds to continue this cohort and initiate two more.

*C.W. Bill Young Cell Transplantation Program*

The Committee provides \$22,701,000 for the C.W. Bill Young Cell Transplantation Program, which is the successor of the National Bone Marrow Donor Registry. The fiscal year 2007 comparable level for the Registry was \$25,168,000 and the budget request for fiscal year 2008 was \$22,701,000.

*Office of Pharmacy Affairs*

The Committee provides \$2,940,000 for the Office of Pharmacy Affairs. The budget request for fiscal year 2008 was \$2,940,000 for this new program. The Office of Pharmacy Affairs promotes access to clinically and cost effective pharmacy services among safety-net clinics and hospitals that participate in the 340B Drug Pricing program. Section 340B of the Public Health Service Act requires drug manufacturers to provide discounts or rebates to a specified set of HHS assisted programs and hospitals that meet the criteria in the Social Security Act for serving a disproportionate share of low income patients. These funds will be used to help resolve deficiencies that could not be addressed within resources available for the normal operations of the office. Specifically, these deficiencies include non-compliance with the 340B pricing requirements and errors and omissions in the office's covered entity database.

The Committee is concerned by price fluctuations in drugs currently accessed through 340b, which play a major role in the delivery of care in community health centers, title X clinics, and rural health centers. The Committee hopes that the funding for Office of Pharmacy Affairs will help to address the variability in pricing to help clinics plan for their patient load.

The Committee is aware that, on January 12, 2007, HRSA issued proposed guidelines that would make significant changes to the long-standing definition of the term "patient" under the 340B program. The Committee agrees with HRSA that certain aspects of the current patient definition guidelines require clarification. However, the proposed guidelines may place undue burden on pharmacists to undertake independent investigations and may inadvertently reduce participation in this important program. The Committee di-

rects HRSA to modify the proposed guidelines in response to public comments received. The Committee directs that HRSA report to the Committee on its plan for future guidance no later than September 15, 2007.

*Poison Control Centers*

The Committee provides \$23,000,000 for Poison Control Center activities. The fiscal year 2007 comparable level was \$23,000,000 and the budget request for fiscal year 2008 was \$10,000,000. The Poison Control program currently supports a mix of grantees: most grantees serve entire States; a few grantees serve multi-State regions; and, in a handful of cases, more than one grantee serves a single State. In allocating funds, the Committee has provided sufficient resources to continue the current approach of allocating funding to all certified centers based on service population.

RURAL HEALTH PROGRAMS

*Rural Health Care Services Outreach Grants*

The Committee provides \$40,000,000 for rural health outreach grants. The fiscal year 2007 comparable level was \$38,885,000 and the budget request for fiscal year 2008 did not include funds for this program. This program supports projects that demonstrate new and innovative models of outreach in rural areas such as integration and coordination of health services.

The Committee understands that many primary care clinics in isolated, remote locations are providing extended stay services and are not staffed or receiving appropriate compensation to provide this service. The Committee encourages the HRSA to continue its support for a demonstration project authorized in the Medicare Modernization Act to evaluate the effectiveness of a new type of provider, the "Frontier Extended Stay Clinic," to provide expanded services in remote and isolated primary care clinics to meet the needs of seriously ill or injured patients who cannot be transferred quickly to acute care referral centers, and patients who require monitoring and observation for a limited time.

Mississippi's Delta is a community in which residents disproportionately experience disease risk factors and children are significantly mentally and physically developmentally behind. The Committee recognizes that communities such as this show positive behavioral change when community-based programs and infrastructure are in place. The Committee believes that collaborative programs offering health education, coordination of health services and health-related research offer the best hope for breaking the cycle of poor health in underprivileged areas such as the Mississippi Delta. Therefore, the Committee recommends the continued funding of these activities (This language was requested by Senator Cochran).

*Rural Health Research*

The Committee provides \$9,500,000 for the Rural Health Research. The fiscal year 2007 comparable level was \$8,737,000 and the budget request for fiscal year 2008 was \$8,737,000. The funds provide support for the Office of Rural Health Policy to be the focal

point for the Department's efforts to improve the delivery of health services to rural communities and populations. Funds are used for rural health research centers, the National Advisory Committee on Rural Health, and a reference and information service.

*Rural Hospital Flexibility Grants*

The Committee provides \$38,538,000 for rural hospital flexibility grants. The fiscal year 2007 comparable level was \$63,538,000 and the budget request for fiscal year 2008 did not include funds for this program.

Under this program, eligible rural hospitals may convert themselves into limited service facilities termed Critical Access Hospitals. Such entities are then eligible to receive cost-based payments from Medicare. The grant component of the program assists States with the development and implementation of State rural health plans, conversion assistance, and associated activities.

Of the amount provided, the Committee includes \$15,000,000 to continue the Small Rural Hospital Improvement Grant Program, as authorized by section 1820(g)(3) of the Social Security Act and Public Law 107-116 and outlined in House Report 107-342.

*Delta Health Initiative*

The Committee has included \$25,000,000 for the Delta Health Initiative as authorized in section 223 of this act (This funding was requested by Senator Cochran). HRSA awarded a multi-year grant in fiscal year 2006 to implement the Delta Health Initiative. The Committee notes that continuation of this award in fiscal year 2008 in the same manner and with the same requirements will satisfy the requirements of section 222.

*Rural and Community Access to Emergency Devices*

The Committee provides \$3,000,000 for rural and community access to emergency devices. The fiscal year 2007 comparable level was \$1,487,000 and the budget request for fiscal year 2008 did not include funding for this program. This appropriation provides funding for both the rural program under section 413 of the Public Health Service Act and the community access demonstration under section 313.

The Committee is concerned that reductions in this program were implemented in a manner that disproportionately impacted rural areas. The Committee expects that fiscal year 2008 funding be equally divided between urban and rural communities.

Funding will be used to train additional rural and community lay rescuers and first responders to use automated external defibrillators [AEDs] and to purchase and place AEDs in public areas where cardiac arrests are likely to occur.

*State Offices of Rural Health*

The Committee provides \$9,000,000 for the State Offices of Rural Health. The fiscal year 2007 comparable level and the budget request for fiscal year 2008 were both \$8,141,000. The State Office of Rural Health program helps the States strengthen rural health care delivery systems by allowing them to better coordinate care and improve support and outreach in rural areas. The Committee

believes that continued funds for this purpose are critical to improving access and quality health care services throughout rural communities.

#### *Black Lung Clinics*

The Committee provides \$6,000,000 for black lung clinics. The fiscal year 2007 comparable level was \$5,891,000 and the budget request for fiscal year 2008 was \$5,886,000. This program funds clinics that treat respiratory and pulmonary diseases of active and retired coal miners, steel mill workers, agricultural workers, and others with occupationally-related respiratory and pulmonary impairments. These clinics reduce the incidence of high-cost inpatient treatment for these conditions.

#### *Radiation and Exposure Screening and Education Program*

The Committee provides \$1,917,000 for activities authorized by the Radiation Exposure Compensation Act. The fiscal year 2007 comparable level was \$1,919,000 and the budget request for fiscal year 2008 was \$1,904,000. This program provides grants for the education, prevention, and early detection of radiogenic cancers and diseases resulting from exposure to uranium during its mining and milling at nuclear test sites.

#### *Native and Rural Alaskan Health Care*

The Committee provides \$39,283,000 for the Denali Commission. The fiscal year 2007 comparable level was \$39,283,000 and the budget request for fiscal year 2008 did not include funding for this program. These funds support the construction and renovation of health clinics, hospitals and social service facilities in rural Alaska, as authorized by Public Law 106-113, to help remote communities in Alaska develop critically needed health and social service infrastructure for which no other funding sources are available, thereby providing health and social services to Alaskans in remote rural communities as they are in other communities throughout the country. The Committee expects the Denali Commission to allocate funds to a mix of rural hospital, clinic, long-term care and social service facilities, rather than focusing exclusively on clinic funding.

#### *Family Planning*

The Committee provides \$300,000,000 for the title X family planning program. The fiscal year 2007 comparable level was \$283,146,000 and the budget request for fiscal year 2008 was \$283,103,000.

Title X grants support primary health care services at more than 4,400 clinics nationwide. About 85 percent of family planning clients are women at or below 150 percent of poverty level. Title X of the Public Health Service Act, which established the family planning program, authorizes the provision of a broad range of acceptable and effective family planning methods and preventive health services to individuals, regardless of age or marital status. This includes FDA-approved methods of contraception.

The Committee remains concerned that programs receiving title X funds ought to have access to these resources as quickly as possible. The Committee again instructs the Department to distribute

to the regional offices all of the funds available for family planning services no later than 60 days following enactment of this bill. The Committee intends that the regional offices should retain the authority for the review, award and administration of family planning funds, in the same manner and timeframe as in fiscal year 2006. The Committee intends that at least 90 percent of funds appropriated for title X activities be for clinical services authorized under section 1001 of the act. The Committee further expects the Office of Family Planning to spend any remaining year-end funds in section 1001 activities.

*Health Care-related Facilities and Activities*

The Committee provides \$191,235,000 for the construction and renovation (including equipment) of health care-related facilities and other health care-related activities. No funds were provided for these purposes in fiscal year 2007 and the budget request for fiscal year 2008 did not include funding for these activities. The Committee expects HRSA to use no more than 1 percent of the funds allocated for projects for agency administrative expenses. These funds are to be used for the following projects and in the following amounts:

Project	Committee recommendation	Requested by
Addison County Dental Care, Middlebury, VT, for equipment and facility upgrades.	\$200,000	Sanders
AIDS Resource Center Wisconsin, Milwaukee, WI, to provide health care and case management services.	150,000	Kohl
Alaska Family Practice Residency Program, Anchorage, AK, to support its family practice residency programs.	1,000,000	Stevens
Alaska Federal Health Care Access Network, Anchorage, AK, to support activities of the Alaska Telemedicine Advisory Committee.	250,000	Stevens
Alaska Native Medical Center, Anchorage, AK, for equipment .....	750,000	Stevens
Alaska Psychiatric Institute, Juneau, AK, for the Telebehavioral Health Project in Alaska.	400,000	Stevens
Albany Medical Center, Albany, NY, for the establishment of the Patient Safety Center.	500,000	Clinton, Schumer
Albuquerque Indian Health Center, New Mexico, for renovations and equipment.	100,000	Bingaman
Alegent Health Care System, Omaha, NE, for a community-based Electronic Medical Records System.	100,000	Hagel, Ben Nelson
Allegheny General Hospital, Pittsburgh, PA, for equipment .....	200,000	Specter
Allegheny Singer Research Institute, Pittsburgh, PA, for equipment .....	100,000	Specter
Allen Memorial Hospital, Moab, Utah, for construction, renovation, and equipment.	50,000	Hatch
AltaMed Health Services Corporation, Los Angeles, CA, for construction and equipment.	100,000	Boxer
Anchorage Neighborhood Health Center, Anchorage, AK, for construction, renovation, and equipment.	400,000	Murkowski
AnMed Health, Anderson, SC, for renovation and equipment .....	100,000	Graham
Arc of Northern Virginia, Falls Church, VA, for equipment and software to create a Resource Navigator System for individuals with developmental disabilities in the Commonwealth of Virginia.	150,000	Warner, Webb
Armstrong County Memorial Hospital, Kittanning, PA, for equipment .....	100,000	Specter
Association for Utah Community Health, Salt Lake City, Utah, for electronic health records for Utah Community Health Centers.	350,000	Bennett, Hatch
Atchison Hospital Association, Atchison, KS, for renovation and equipment .....	400,000	Brownback
Barnes-Kasson County Hospital, Susquehanna, PA, for renovation and equipment.	100,000	Specter
Baylor College of Medicine, Houston, TX, for construction, renovation, and equipment at the Vannie E. Cook, Jr. Children's Cancer and Hematology Clinic.	200,000	Hutchison

Project	Committee recommendation	Requested by
Baylor Research Institute, Dallas, Texas, for renovation and equipment .....	250,000	Cornyn
Bear River Health Department, Logan, Utah, for the Medical Reserve Corps Program.	50,000	Hatch
Beaver Valley Hospital, Beaver, Utah, for renovation and equipment .....	50,000	Hatch
Beebe Medical Center, Lewes, DE, for construction, renovation and equipment.	200,000	Biden, Carper
Beloit Area Community Health Center, Beloit, WI, for construction, renovation and equipment.	500,000	Kohl
Benefis Healthcare Foundation, Great Falls, MT, for health information technology.	400,000	Baucus
Billings Clinic, Billings, MT, for construction, renovation and equipment of a cancer center.	400,000	Baucus, Tester
Billings Clinic, Billings, MT, for a Rural Clinical Information System .....	350,000	Baucus
Billings Clinic, Billings, MT, for the Diabetes Center to prevent and treat diabetes.	375,000	Tester, Baucus
Bloomsburg Hospital, Bloomsburg, PA, for cardiology center construction .....	100,000	Specter
Boone County Senior Citizen Service Corporation, Columbia, MO, for equipment and technology for the Alzheimer's Disease Demonstration Center on the Bluff's campus.	1,000,000	Bond
Boston Health Care for the Homeless Program, Boston, MA, for the construction of a health care facility.	175,000	Kennedy, Kerry
Boston Medical Center, Boston, MA, for facilities and equipment for the J. Joseph Moakley Medical Services Building.	350,000	Kennedy, Kerry
Boys Town National Research Hospital, Omaha, NE, for construction, renovation and equipment.	900,000	Nelson
Brackenridge Hospital, Austin, TX, for construction, renovation, and equipment.	200,000	Hutchison
Briar Cliff University, Sioux City, IA for facilities and equipment .....	100,000	Harkin, Grassley
Bridgeport Hospital, Bridgeport, CT, for construction, renovation and equipment.	200,000	Dodd, Lieberman
Brockton Hospital, Brockton, MA, for equipment .....	200,000	Kennedy, Kerry
Brockton Neighborhood Health Center, Brockton, MA, for construction .....	200,000	Kennedy, Kerry
Camillus House, Miami, FL, to construct a new medical facility .....	150,000	Bill Nelson, Martinez
Carilion Health System, Roanoke, VA, for renovation and equipment .....	150,000	Warner, Webb
Caring Health Center, Inc., Springfield, MA, for equipment needed to expand urgent care and oral health programs.	250,000	Kennedy, Kerry
Carnegie Mellon University, Pittsburgh, PA, for equipment and renovation .....	150,000	Specter
Carolinas Healthcare Center, Charlotte, North Carolina, for equipment for the Pediatric Imaging Center at the Levine Children's Hospital.	350,000	Dole, Burr
Case Western Reserve University, Cleveland, OH, for equipment .....	100,000	Voinovich
Central Carolina Allied Health Center, Sumter, SC, for construction, renovation, and equipment.	250,000	Graham
Charles Drew Health Center, Inc., Omaha, NE, for construction, renovation and equipment.	1,000,000	Ben Nelson
Chester County Hospital, West Chester, PA, for construction .....	100,000	Specter
Children's Hospital of KidsPeace, Orefield, PA, for construction and equipment.	100,000	Specter
Children's Hospitals and Clinics of Minnesota, Minneapolis, MN, to provide pediatric palliative care education and consultation services to clinicians and providers.	300,000	Klobuchar, Coleman
Children's Health Fund, New York, NY, for the Mississippi Gulf Coast Children's Health Project in Gulfport, MS.	150,000	Cochran
Children's Health Fund, New York, NY, to provide mental health services to children and families.	300,000	Landrieu
Children's Hospital Boston, Boston, MA, for the development of comprehensive pediatric electronic medical records system.	220,000	Kennedy, Kerry
Children's Hospital of Philadelphia, Philadelphia, PA, for equipment .....	150,000	Specter
Children's Hospital of Pittsburgh, Pittsburgh, PA, for construction .....	150,000	Specter, Casey
Children's Hospital of The King's Daughters (CHKD) Health Systems, Norfolk, VA, to purchase and equip a Mobile Intensive Care Transport Vehicle for the critically ill neonatal and pediatric populations.	200,000	Warner, Webb
Children's Hospital of Wisconsin, Milwaukee, WI, for construction, renovation and equipment.	200,000	Kohl
Children's Hospital, Aurora, CO, for equipment .....	200,000	Allard, Salazar
Children's Institute, Pittsburgh, PA, for construction and program expansion ....	100,000	Specter, Casey

Project	Committee recommendation	Requested by
Children's Medical Center, Dallas, TX, for construction, renovation, and equipment.	200,000	Hutchison, Cornyn
Children's Specialized Hospital, Mountainside, NJ, for construction, renovation and equipment.	300,000	Lautenberg, Menendez
Chippewa Valley Hospital, Durand, WI, for equipment .....	200,000	Kohl
CHOICE Regional Health Network, Olympia, WA, for construction, renovation and equipment.	500,000	Murray
Christiana Care Health System, Wilmington, DE, for construction, renovation and equipment.	500,000	Biden, Carper
CHRISTUS Santa Rosa Children's Hospital, San Antonio, TX, for construction, renovation, and equipment.	200,000	Hutchison
Clarion Hospital Healthcare System, Clarion, PA, for electronic medical records.	100,000	Specter
Clearfield Hospital, Clearfield, PA, for equipment .....	100,000	Specter
Cold Spring Harbor Laboratory, Cold Spring Harbor, NY, for The Women's Cancer Genomics Center.	900,000	Clinton, Schumer
College Misericordia, Dallas, PA, for construction .....	100,000	Specter
College of Saint Scholastica, Duluth, MN, to implement a rural health and technology demonstration project.	300,000	Coleman, Klobuchar
Community Action Agency of Southern New Mexico, Las Cruces, NM, for the Access to Healthcare Initiative.	500,000	Domenici, Bingaman
Community College of Rhode Island, Lincoln, RI, for equipment and laboratory facilities for health care education.	250,000	Reed
Community Health Center of Southeast Kansas, Pittsburg, KS, for renovation and equipment.	500,000	Brownback
Community Health Center of the Black Hills, Rapid City, SD, for facilities and equipment.	400,000	Johnson, Thune
Community Health Centers in Iowa .....	2,300,000	Harkin
Community Health Centers of Arkansas, North Little Rock, AR, for an infrastructure development program.	600,000	Lincoln, Pryor
Community Health Centers of the Rutland Region, Bomoseen, VT, for equipment.	100,000	Sanders
Community Home, Health & Hospice, Longview, WA, to implement a home health telemonitoring system.	250,000	Murray, Cantwell
Community Hospital Telehealth Consortium, Lake Charles, LA, to support the information technology networks of regional not-for-profit community health systems.	300,000	Landrieu, Vitter
Community Medical Center, Missoula, MT, for construction, renovation and equipment.	350,000	Baucus, Tester
Cook Children's Medical Center, Fort Worth, TX, for equipment .....	200,000	Hutchison
Cooperative Telehealth Network, Portneuf Medical Center, Pocatello, ID, to provide and improve distance healthcare access in southeast Idaho.	350,000	Craig, Crapo
Counseling Services of Addison County, Middlebury, VT, to implement an electronic medical record.	400,000	Leahy
Crumley House Brain Injury Rehabilitation Center, Limestone, TN, for brain injury programs.	100,000	Alexander
Culpeper Regional Hospital, Culpeper, VA, for facility design, engineering and construction to expand the Emergency Department.	300,000	Warner, Webb
CVPH Medical Center, Plattsburgh, NY, for construction, renovation and equipment.	1,500,000	Schumer, Clinton
Defiance College, Defiance, Ohio, for training autism caregivers .....	200,000	Brown
Delta Dental of Iowa, Ankeny, IA, for a dental loan repayment program .....	150,000	Harkin, Grassley
Delta Dental of South Dakota, Pierre, SD, to provide mobile dental health services.	200,000	Johnson
Denver Health and Hospital Authority, Denver, CO, for construction, renovation and equipment.	200,000	Salazar
Desert Hot Springs, Downey, CA, to construct a primary and urgent care medical clinic.	100,000	Boxer
DuBois Regional Medical Center, Dubois, PA, for equipment .....	100,000	Specter, Casey
East Carolina University, Greenville, NC, for construction, renovation, and equipment for the Metabolic Institute.	100,000	Burr, Dole
East Orange General Hospital, East Orange, NJ, for facilities and equipment ....	750,000	Lautenberg, Menendez
Easter Seals Iowa, Des Moines, IA, for construction and enhancement of a health care center.	400,000	Harkin

Project	Committee recommendation	Requested by
Easter Seals Metropolitan Chicago, Chicago, IL, for their therapeutic School and Center for Autism Research.	650,000	Obama, Durbin
Eastern Oklahoma State College, Wilburton, OK, for health information systems and pharmacy technology programs.	100,000	Inhofe
Eastern Shore Rural Health System Onley Community Health Center, Nassawadox, VA, for construction, renovation and equipment.	125,000	Webb, Warner
Ed Roberts Campus in Berkeley, CA, for construction, renovations and equipment.	250,000	Boxer
Elliot Health System, Manchester, NH, for a backup and support system for continuity of services.	250,000	Gregg
Ephrata Community Hospital, Ephrata, PA, for equipment .....	100,000	Specter
Family Health Centers of San Diego, Inc., San Diego, CA, for construction, renovation and equipment.	100,000	Boxer
Fenway Community Health Center, Boston, MA, for construction, renovation and equipment.	250,000	Kennedy, Kerry
Fish River Rural Health, Eagle Lake, ME, for construction, renovation, and equipment.	100,000	Collins, Snowe
Fletcher Allen Health Care, Burlington, VT, for construction, renovation and equipment.	500,000	Leahy
Fort Wayne, IN, for training of emergency medical personnel, including equipment purchase.	200,000	Bayh
Fox Chase Cancer Center, Philadelphia, PA, for equipment .....	150,000	Specter
Franklin County Medical Center, Preston, ID, for construction, renovation, and equipment.	250,000	Craig
Free Clinic of the Greater Menomonie Area, Inc, Menomonie, WI, for equipment.	100,000	Kohl
Free Clinics of Iowa in Des Moines, IA, to support a network of free clinics .....	400,000	Harkin
Fulton County Medical Center, McConnellsburg, PA, for equipment .....	100,000	Specter
Garfield Memorial Hospital, Panguitch, Utah, for construction, renovation, and equipment of the emergency room and adjacent clinic.	100,000	Hatch
Geisinger Health System, Danville, PA, for construction and equipment .....	200,000	Specter
Generations, Inc, Camden, NJ, for construction of a medical center .....	450,000	Lautenberg, Menendez
Georgia Southern University, Statesboro, GA, for rural health outreach and training.	100,000	Chambliss
Glory House, Sioux Falls, SD, to construct a methamphetamine treatment center.	100,000	Johnson
Good Samaritan Regional Medical Center, Pottsville, PA, for medical outreach.	100,000	Specter
Good Shepherd Rehabilitation Hospital, Allentown, PA, for equipment .....	100,000	Specter
Grady Health System, Atlanta, GA, to implement a new Electronic Health Record System.	200,000	Chambliss, Isakson
Greene County, Waynesburg, PA, for a telemedicine initiative .....	100,000	Specter
Gritman Medical Center, Moscow, ID, for equipment and technology .....	450,000	Craig, Crapo
Gundersen Lutheran Hospital, La Crosse, WI, for a health information technology system.	200,000	Kohl
Halifax Regional Health System, South Boston, VA, for equipment purchase and technology system upgrades for electronic medical records.	150,000	Warner, Webb
Hamot Medical Center, Erie, PA, for construction and equipment .....	100,000	Specter
Hazleton General Hospital, Hazleton, PA, for equipment .....	100,000	Specter
Health Care Foundation of North Mississippi, Tupelo, MS, for construction, renovation, and equipment.	250,000	Cochran
Health Occupation Students of America, Flower Mound, TX, for the HOSA Mississippi Emergency Preparedness Pipeline.	200,000	Cochran
HealthHUB, South Royalton, VT, for equipment and facilities .....	100,000	Sanders
Heartland Partnership, Peoria, IL, for construction of a cancer research laboratory.	500,000	Durbin
Helene Fuld College of Nursing, New York, NY, for construction, renovation and equipment.	100,000	Schumer, Clinton
Henry Ford Health System, Flint, MI, for training in advanced techniques .....	350,000	Levin, Stabenow
Heritage Valley Health System, Beaver, PA, for construction .....	100,000	Specter
Hidalgo Medical Services Inc., Lordsburg, NM, for construction, renovation, and equipment for a Community Health Center in Silver City, New Mexico.	1,000,000	Domenici, Bingaman
Hilo Medical Center, HI, for a medical robotics training lab .....	100,000	Inouye
Holy Cross Hospital, Chicago, IL, for equipment .....	1,200,000	Durbin
Holy Cross Hospital, Silver Spring, MD, for equipment .....	375,000	Mikulski, Cardin

Project	Committee recommendation	Requested by
Holy Redeemer Health System, Huntingdon Valley, PA, for construction .....	100,000	Specter
Holy Rosary Healthcare, Miles City, MT, for a tele-radiology program .....	200,000	Tester
Holy Spirit Hospital, Camp Hill, PA, for equipment .....	100,000	Specter
Holyoke Hospital, Holyoke, MA, for equipment .....	220,000	Kennedy, Kerry
Hood River County, Hood River, OR, for construction of an integrated health care facility.	350,000	Wyden, Smith
Hospice Care Plus, Berea, KY, for construction, renovation, and equipment .....	150,000	Bunning
Hospital for Special Surgery, New York, NY, for expansion and modernization of its clinical facilities.	500,000	Clinton, Schumer
House of Mercy in Des Moines, Iowa, for renovation of the medical clinic .....	300,000	Harkin
Hunter's Hope Foundation, Orchard Park, NY, for equipment in the Krabbe's disease programs.	500,000	Clinton, Schumer
Huntridge Teen Center and Nevada Dental Association, Las Vegas, NV, to purchase equipment and coordinate care for the Huntridge Dental Clinic.	175,000	Reid
Illinois Primary Health Care Association, to develop an electronic medical record system.	550,000	Durbin, Obama
Indiana Regional Medical Center, Indiana, PA, for services expansion .....	100,000	Specter
Inova Health System, Falls Church, VA, for construction, renovation, and equipment.	100,000	Warner, Webb
INTEGRIS Health, Oklahoma City, OK, for statewide digital radiology equipment.	100,000	Inhofe
Iowa Caregivers Association, for training and support of certified nurse assistants.	350,000	Harkin
Jackson Medical Mall Foundation, Jackson, MS, for construction, renovation, and equipment.	200,000	Cochran
Jackson State University, Jackson, MS, for Southern Institute for Mental Health Research and Training.	400,000	Cochran
Jameson Hospital, New Castle, PA, for construction .....	100,000	Specter
Jefferson Regional Medical Center, Pine Bluff, AR, for equipment .....	2,000,000	Lincoln, Pryor
Jefferson Regional Medical Center, Pittsburgh, PA, for equipment .....	100,000	Specter
Jewish Renaissance Medical Center, Perth Amboy, NJ, for construction, renovation and equipment.	200,000	Menendez, Lautenberg
Johns Hopkins University, Baltimore, MD, to expand the Critical Event Preparedness and Response program.	350,000	Mikulski
Kane Community Hospital, Kane, PA, for equipment .....	100,000	Specter
Kansas State University, Manhattan, KS, for equipment for the Midwest Institute for Comparative Stem Cell Biology.	500,000	Brownback
Keesler AFB, Biloxi, MS, for equipment for Regional Telepathology in South Mississippi.	250,000	Cochran
Kennedy Krieger Institute, Baltimore, MD, for medical equipment .....	350,000	Mikulski, Cardin
Kenosha Community Health Center, Kenosha, WI, for construction, renovation and equipment.	200,000	Kohl
Kootenai Medical Center, Sandpoint, ID, to continue providing and improving distance healthcare access in north Idaho.	250,000	Craig
Lakeshore Foundation, Birmingham, AL, for construction, renovation, and equipment.	600,000	Sessions
Lamoille Community Health Services, Morrisville, VT, for rural outreach activities.	100,000	Sanders
Lane County, Eugene, Oregon, for construction, renovation, and equipment of the Springfield Community Health Center.	150,000	Smith, Wyden
Le Bonheur Children's Medical Center, Memphis, TN, for construction, renovation, and equipment.	500,000	Alexander
Le Mars Dialysis Center, LeMars, IA, for construction, renovation and equipment.	250,000	Harkin
Legacy Health System, Portland, Oregon, for telemedicine equipment .....	100,000	Smith
Lehigh Valley Hospital and Health Network, Allentown, PA, for construction .....	100,000	Specter
Lewis and Clark Community College, Godfrey, IL, to purchase and equip a mobile health clinic to serve rural areas.	350,000	Obama
LifeBridge Health of Baltimore, MD, to implement the Computerized Physician Order Entry Initiative.	500,000	Mikulski, Cardin
Lou Ruvo Alzheimer's Institute, Las Vegas, NV, for construction, renovation, and equipment.	400,000	Ensign
Madison Community Health Center, Madison, WI, for equipment .....	325,000	Kohl
Magee Rehabilitation Hospital, Philadelphia, PA, for equipment .....	100,000	Specter

Project	Committee recommendation	Requested by
Magee-Womens Research Institute and Foundation, Pittsburgh, PA, for equipment.	100,000	Specter
Maine Coast Memorial Hospital, Ellsworth, ME, for construction, renovation, and equipment.	190,000	Collins, Snowe
Maliheh Free Clinic, Salt Lake City, Utah, for renovation and equipment .....	50,000	Hatch
Marcus Daly Memorial Hospital, Hamilton, MT, for construction, renovation and equipment.	300,000	Baucus
Marcus Institute, Atlanta, GA, for equipment .....	200,000	Chambliss, Isakson
Marian Community Hospital, Carbondale, PA, for equipment .....	100,000	Specter
Marias Medical Center, Shelby, MT, to purchase equipment .....	200,000	Baucus
Marquette University, Milwaukee, WI, for a dental health outreach program .....	250,000	Kohl
Marshall University, WV, for the Bioengineering and Biomufacturing Institute.	1,575,000	Byrd
Marshall University, WV, for the construction of a patient care and clinical training site in Southwestern West Virginia.	3,250,000	Byrd
Marshall University, WV, for the Virtual Colonoscopy Outreach Program .....	1,575,000	Byrd
Maryland Hospital Association, Elkridge, MD, for the Nursing Career Lattice Program.	450,000	Mikulski
Maui Community Health Center, HI, for construction, renovation and equipment.	800,000	Inouye
Maui Economic Development Board, HI, for the Lanai Women's Initiative .....	150,000	Inouye
McKinley County, New Mexico, Gallup, NM, for construction, renovation, and equipment of the dialysis center.	1,000,000	Domenici, Bingaman
Meadville Medical Center, Meadville, PA, for construction and equipment .....	100,000	Specter, Casey
Medical Education Development Consortium, Scranton, PA, for construction .....	1,000,000	Specter, Casey
Memorial Hospital of Laramie County, Cheyenne, WY, for design of the Comprehensive Community Cancer Center.	400,000	Enzi
Memorial Hospital, York, PA, for information technology equipment .....	100,000	Specter
Memphis Bioworks Foundation, Memphis, TN, for construction, renovation, and equipment at the research park.	500,000	Alexander
Mercy Fitzgerald Hospital, Darby, PA, for equipment .....	100,000	Specter
Mercy Health Foundation, Durango, CO, for construction, renovation and equipment.	200,000	Salazar
Mercy Health Partners, Scranton, PA, for equipment .....	100,000	Specter
Mercy Hospital of Philadelphia, Philadelphia, PA, for equipment .....	100,000	Specter
Mercy Hospital, Baltimore, MD, for equipment .....	850,000	Mikulski
Mercy Medical Center, Springfield, MA, for equipment .....	225,000	Kennedy, Kerry
Methodist Hospital System, Houston, TX, for equipment .....	200,000	Hutchison, Cornyn
Methodist Hospital, Houston, Texas, for renovation and equipment .....	500,000	Cornyn, Hutchison
Metro Health, Cleveland, OH, for The Northeast Ohio Senior Health and Wellness Center.	100,000	Voinovich
Mid Valley Hospital, Peckville, PA, for equipment, construction and renovation.	100,000	Specter
Minot State University, Minot, ND, to monitor and treat individuals with autism spectrum disorder in rural areas with limited access to health professionals.	500,000	Dorgan, Conrad
Mississippi Hospital Association, Madison, MS, for the Managed Growth Initiative.	400,000	Cochran
Mississippi Primary Health Care Association, Jackson, MS, .....	400,000	Cochran
Mississippi State University, Mississippi State, MS, for the Tissue Engineering Research Center.	350,000	Cochran
Monongahela Valley Hospital, Monongahela, PA, for equipment .....	100,000	Specter
Monticello, Utah, to provide preventive screening for Monticello Mill Legacy .....	100,000	Hatch
Moses Taylor Hospital, Scranton, PA, for equipment .....	100,000	Specter, Casey
Mount Nittany Medical Center, State College, PA, for construction, renovation, and equipment.	100,000	Specter, Casey
Mount Sinai Medical Center, Miami Beach, FL, for construction, renovation and equipment.	400,000	Bill Nelson, Martinez
Mountain State University, Beckley, WV, for the construction of the Allied Health Technology Tower.	3,600,000	Byrd
Myrna Brind Center of Integrative Medicine, Philadelphia, PA, to develop three models of integrative programs of clinical excellence.	100,000	Specter
Nebraska Hospital Association, Lincoln, NE, to expand the Nebraska Statewide Telehealth Network.	400,000	Hagel, Ben Nelson
Nevada Rural Hospital Partners, Reno, NV, to expand and enhance a rural telemedicine project.	350,000	Reid

Project	Committee recommendation	Requested by
New Hampshire Community Health Centers, Concord, NH, for construction, renovation, and equipment.	400,000	Gregg
New Orleans Office of Homeland Security and Emergency Preparedness, New Orleans, LA, for equipment and supplies for a mobile medical hospital.	1,000,000	Landrieu
New York-Presbyterian Hospital, NY, for cardiac care telemetry .....	600,000	Clinton, Schumer
Noble Hospital, Westfield, MA, for construction, renovation and equipment .....	200,000	Kennedy, Kerry
Norman Regional Health System, Norman, OK, for a health information technology system.	100,000	Inhofe
North Country Children's Clinic, Inc., Watertown, NY, for construction and renovation.	500,000	Clinton, Schumer
North Dakota State University, Fargo, ND, to expand a statewide telepharmacy project.	1,000,000	Dorgan, Conrad
North General Hospital, New York, NY, for construction, renovation and equipment.	700,000	Clinton, Schumer
Northcentral Montana Healthcare Alliance, Great Falls, MT, for health information technology.	200,000	Tester
Northeastern Pennsylvania Technology Institute, Scranton, PA, to connect the eighteen regional hospitals with state and federal medical experts during incident response and recovery.	100,000	Specter
Northern Larimer County Health District, Fort Collins, CO, for the Acute Mental Health and Detoxification Facility.	100,000	Salazar
Northern Maine Community College, Presque Isle, ME, for construction, renovation, and equipment.	150,000	Collins, Snowe
Northern Virginia Urban League, Alexandria, VA, for services and equipment to promote healthy pregnancy outcomes in the Northern Virginia region.	150,000	Warner, Webb
Northwest Colorado Visiting Nurse Association, Inc., Steamboat Springs, CO, to construct and equip a community health clinic.	150,000	Salazar
Northwest Hospital and Medical Center, Seattle, WA, for a Community Health Education and Simulation Center.	1,150,000	Murray, Cantwell
Northwest Hospital, Baltimore, MD, for equipment .....	375,000	Mikulski
Northwest Nazarene University, Nampa, ID, for construction, renovation, and equipment.	350,000	Craig, Crapo
Northwest Research and Education Institute, Billings, MT, to create a continuing medical education program.	350,000	Baucus
NYU School of Medicine, New York, NY, for the Basic Research and Imaging Program.	900,000	Clinton, Schumer
Oconee Memorial Hospital, Seneca, SC, to design, develop, and implement a community-wide health information exchange system.	100,000	Graham
Ohio State University Comprehensive Cancer Center, Columbus, OH, for design, construction, renovation, and equipment.	100,000	Voinovich
Ohio University, Athens, Ohio, for the Appalachian Healthcare Screening Program.	200,000	Brown
Ohio Valley General Hospital, McKees Rocks, PA, for equipment .....	100,000	Specter
Oklahoma Foundation for Kidney Disease, Oklahoma City, OK, for telehealth applications.	100,000	Inhofe
Oklahoma Medical Research Foundation, Oklahoma City, OK, for construction, renovation, and equipment of a Biotech Research Tower.	100,000	Inhofe
Oklahoma State University, Center for Health Sciences, Tulsa, OK, for mobile health clinics.	100,000	Inhofe
Orange County Government, Orlando, FL, for health information technology equipment.	200,000	Martinez, Bill Nelson
Ottumwa Regional Health Center, Ottumwa, IA, for construction, renovation and equipment.	445,000	Harkin, Grassley
Our Lady of Lourdes Medical Center, Camden, NJ, for facilities and equipment.	700,000	Lautenberg, Menendez
Owensboro Medical Center, Owensboro, KY, for construction, renovation, and equipment.	150,000	Bunning
Penn State Milton S. Hershey Medical Center/College of Medicine, Hershey, PA, for construction.	200,000	Specter
Philadelphia College of Osteopathic Medicine, Philadelphia, PA, for equipment.	100,000	Specter
Phoebe Putney Memorial Hospital, Albany, GA, to partner with Dougherty County School System to implement a pilot program to promote healthy lifestyles in school children.	100,000	Chambliss

Project	Committee recommendation	Requested by
Piedmont Access to Health Services, Inc. (PATHS), Danville, VA, for construction, renovation and equipment.	175,000	Webb, Warner
Pinnacle Health System, Harrisburg, PA, for construction .....	100,000	Specter
Pioneer Valley Life Sciences Institute, Springfield, MA, for the construction of biomedical research facilities.	450,000	Kennedy, Kerry
Pocono Medical Center, East Stroudsburg, PA, for construction .....	100,000	Specter
Pointe Coupée Better Access Community Health (BACH), New Roads, LA, to sustain a community-based clinic and diabetic outreach program.	350,000	Landrieu, Vitter
Powell County, Deer Lodge, MT, for equipment for the Powell County Medical Center.	100,000	Baucus
Primary Care Association of HI, for construction, renovation, equipment, disability services and outreach at the State's health centers.	1,000,000	Inouye, Akaka
Providence Community Health Center, Providence, RI, for construction .....	300,000	Reed, Whitehouse
Providence Medical Center, Kansas City, KS, for telehealth upgrades .....	500,000	Brownback
Providence Telehealth Network Rural Outreach Program, Spokane, WA, for equipment.	300,000	Murray
Rapid City Area School District 51/4, Rapid City, SD, for construction, renovation, and equipment for a school-based health clinic.	100,000	Thune
Reading Hospital and Medical Center, West Reading, PA, for equipment .....	100,000	Specter
Redevelopment Authority of the County of Washington, Washington, PA, for construction and renovation at Washington Hospital.	100,000	Specter
Rhode Island Quality Institute, Providence, RI, to build a health information exchange.	700,000	Whitehouse, Reed
Rice University, Houston, TX, for equipment for the Collaborative Research Center.	500,000	Hutchison
Riverside County, Moreno Valley, CA, for Riverside County Regional Medical Center Trauma Center renovation.	500,000	Feinstein
Riverside Healthcare, Kankakee, IL, for a computerized physician order entry system.	350,000	Obama
Rochester General Hospital, Rochester, NY, for heart failure equipment and training.	250,000	Clinton, Schumer
Roper/Saint Francis Healthcare, Charleston, SC, for the expansion initiative for construction, renovation, and equipment.	200,000	Graham
Rosebud Alcohol Drug Treatment Center, Rosebud, SD, for the construction of a treatment wing.	800,000	Johnson
Rosebud Inter-facility Transport, Rosebud, SD, for purchase of emergency vehicles and equipment.	200,000	Johnson
Rural Wisconsin Health Cooperative, Sauk City, WI, for health information technology.	225,000	Kohl
Sac and Fox Tribe of the Mississippi in Iowa for a Tribal Health Care Clinic ....	750,000	Harkin
Sacred Heart Hospital of Allentown, Allentown, PA, for equipment .....	100,000	Specter
Saint Agnes Hospital, Baltimore, MD, for equipment .....	850,000	Mikulski, Cardin
Saint Alphonsus Regional Medical Center, Boise, ID, for rural emergency medical services training and equipment.	250,000	Craig
Saint Ambrose University, Davenport, IA, for the construction of a Center for Health Sciences Education.	500,000	Harkin, Grassley
Saint Anthony Hospital, Oklahoma City, OK, for construction, renovation, and equipment of a Level II Newborn Nursery.	100,000	Inhofe
Saint Bernard Health Center, Inc., Chalmette, LA, for construction, renovation and equipment.	1,500,000	Landrieu, Vitter
Saint Croix Regional Family Health Center, Princeton, ME, for construction, renovation, and equipment.	180,000	Collins, Snowe
Saint Francis Hospital, Escabana, MI, for construction, renovation and equipment.	300,000	Levin, Stabenow
Saint Francis University, Loretto, PA, for equipment .....	100,000	Specter
Saint Joseph's Hospital, Nashua, NH, for the Patient Focused Technology Initiative.	700,000	Sununu, Gregg
Saint Joseph's Hospital, Phoenix, AZ, to purchase and equip a mobile prenatal clinic for the MoMobile program.	500,000	Kyl
Saint Louis Children's Hospital, St. Louis, MO, for construction, renovation, and equipment of the Neonatal Intensive Care Unit Expansion.	1,000,000	Bond
Saint Luke's Episcopal Hospital, Houston, TX, for equipment for the Neuroscience Center.	200,000	Hutchison
Saint Luke's Hospital, Allentown, PA, for construction and equipment .....	100,000	Specter
Saint Luke's Miners Memorial Hospital, Coaldale, PA, for equipment .....	100,000	Specter

Project	Committee recommendation	Requested by
Saint Luke's Regional Medical Center, Boise, ID, for construction, renovation, and equipment.	200,000	Craig, Crapo
Saint Mary Medical Center, Langhorne, PA, for health outreach programs .....	100,000	Specter
Saint Mary's Good Samaritan Hospital, Mount Vernon, IL, for equipment .....	500,000	Durbin
Saint Mary's Hospital Incorporated, Waterbury, CT, for construction, renovation and equipment.	650,000	Lieberman, Dodd
Saint Mary's Medical Center, Lewiston, ME, for equipment .....	205,000	Collins, Snowe
Saint Patrick Hospital and Health Sciences Center, Missoula, MT, to implement an electronic medical records system.	400,000	Baucus, Tester
Saint Peter's Hospital, Helena, MT, for construction, renovation and equipment.	150,000	Baucus
Saint Vincent Healthcare Foundation, Billings, MT, for a feasibility study on the establishment of the Montana Children's Hospital Network.	750,000	Baucus, Tester
Saint Vincent Regional Medical Center, Santa Fe, NM, for construction, renovation, and equipment.	750,000	Domenici, Bingaman
Saint Vincent's Hospital, Bridgeport, CT, for renovation and equipment .....	200,000	Dodd
San Diego County, Santee, CA, to purchase equipment for Edgemoor Hospital renovation.	500,000	Feinstein
San Francisco, CA, for HIV/AIDS outreach programs .....	700,000	Feinstein
San Luis Valley Regional Medical Center, Alamosa, CO, for health information technology.	200,000	Salazar
Sanford Health Mid-Dakota Medical Center, Chamberlain, SD, for medical equipment.	100,000	Johnson
Seattle Cancer Care Alliance, Seattle, WA, for equipment .....	1,500,000	Murray, Cantwell
Sharon Regional Health System, Sharon, PA, for equipment .....	100,000	Specter
Shodair Children's Hospital, Helena, MT, for project Cancer Genetics .....	150,000	Baucus
Sierra Vista Hospital, Truth or Consequences, NM, for construction, renovation, and equipment.	750,000	Domenici, Bingaman
Sixteenth Street Community Health Center, Milwaukee, WI, for renovations .....	325,000	Kohl
Soldiers & Sailors Memorial Hospital, Wellsboro, PA, for emergency department expansion.	100,000	Specter
Somerset Hospital, Somerset, PA, for equipment .....	100,000	Specter
South Carolina Office of Rural Health, Lexington, SC, for an electronic medical records system.	200,000	Graham
South Dakota State University, Brookings, SD, for construction of a pharmacy education space.	300,000	Johnson
South Dakota State University, Brookings, SD, to construct the Center for Accelerated Design, Screen, and Development of Biomaterials.	350,000	Johnson
South Sound Health Communication Network, Tacoma, WA, for a community Health Record Bank.	250,000	Cantwell
Southcentral Foundation, Anchorage, AK, to purchase equipment for the Primary Care Center in Anchorage, Alaska.	750,000	Stevens
Southern Methodist University, Dallas, TX, for facilities and equipment at the Southwestern Consortium for Anti-Infectives and Virological Research.	200,000	Hutchison
Stone Soup Group, Anchorage, AK, to continue and expand services to Alaskans with autism in Alaska.	200,000	Stevens
Straub Hospital Burn Center, HI, for health professions training in burn treatment.	100,000	Inouye
Susquehanna Health System, Williamsport, PA, for equipment .....	100,000	Specter
Swedish Medical Center, Seattle, WA, for construction, renovation and equipment.	250,000	Cantwell
Temple University Health System, Philadelphia, PA, for construction and renovation.	200,000	Specter, Casey
Tennessee State University, Nashville, TN, for construction, renovation, and equipment of an animal research facility for biomedical research.	250,000	Alexander
Texas A&M University, College Station, TX, for equipment in the Michael E. DeBaKey Institute.	300,000	Hutchison
Texas Health Institute, Austin, TX, for equipment for an emergency communications demonstration project.	200,000	Hutchison
Texas Medical Center, Houston, TX, for the National Center for Human Performance.	200,000	Hutchison
Thomas Jefferson University Hospital, Philadelphia, PA, for construction and equipment.	200,000	Specter, Casey
Toumey Health Care System, Sumter, SC, for equipment .....	100,000	Graham

Project	Committee recommendation	Requested by
Touro University, Henderson, NV, for construction and equipment for the Center for Autism Spectrum Disorders.	500,000	Reid
Translational Genomics Research Institute, Phoenix, AZ, for construction, renovation, and equipment.	500,000	Kyl
Trinitas Health Foundation, Elizabeth, NJ, for construction, equipment and renovation.	200,000	Menendez, Lautenberg
Trinity County, Weaverville, CA, for renovation and equipment to Mountain Community Medical Services.	100,000	Boxer
Tyrone Hospital, Tyrone, PA, for equipment .....	100,000	Specter
UMass Memorial Health Care in Worcester, MA for a high-speed network and Picture Archiving and Communication System.	900,000	Kennedy, Kerry
University of Alabama, Tuscaloosa, AL, for construction, renovation, and equipment.	11,000,000	Shelby
University of Alaska Statewide Office, Fairbanks, AK, for the Health Distance Education Program in Alaska.	500,000	Stevens
University of Alaska Statewide Office, Fairbanks, AK, to develop and implement a statewide health agenda in Alaska.	750,000	Stevens
University of Alaska/Anchorage, Anchorage, AK, for the Geriatric and Disabled Care Training Program in Anchorage, Alaska.	250,000	Stevens
University of Colorado, Denver, CO, for construction, renovation, and equipment.	300,000	Allard, Salazar
University of Delaware, Newark, DE, for the Delaware Biotechnology Institute ...	450,000	Biden, Carper
University of Findlay, Findlay, Ohio, for public health training programs .....	250,000	Brown
University of Georgia, Athens, GA, for construction, renovation, and equipment.	100,000	Chambliss
University of Iowa, Iowa City, IA, for the School of Public Health .....	3,000,000	Harkin
University of Iowa, Iowa City, IA, for the Iowa Institute for Biomedical Discovery.	5,000,000	Harkin, Grassley
University of Kentucky Research Foundation, Lexington, KY, for equipment and renovation.	1,500,000	McConnell
University of Kentucky Research Foundation, Lexington, KY, for the Kentucky Oral Health Initiative.	500,000	McConnell
University of Louisville Research Foundation, Louisville, KY, to upgrade and expand cardiovascular facilities at the University of Louisville.	10,750,000	McConnell
University of Maryland School of Nursing, Baltimore, MD, for the Institute for Educators in Nursing and Health Professions.	1,000,000	Mikulski, Cardin
University of Miami Miller School of Medicine, Miami, FL, for the Center for Patient Safety.	500,000	Bill Nelson
University of Minnesota, Minneapolis, MN, for construction, renovation, and equipment.	350,000	Coleman, Klobuchar
University of Mississippi Medical Center, Jackson, MS, for construction, renovation, and equipment at the Arthur C. Guyton Laboratory Building.	3,000,000	Cochran
University of Mississippi Medical Center, Jackson, MS, for equipment for the School of Dentistry.	150,000	Cochran
University of Mississippi School of Pharmacy, University, MS, for construction, renovation, and equipment.	2,200,000	Cochran
University of Mississippi, University, MS, for Phase II of the National Center for Natural Products Research.	5,000,000	Cochran
University of Mississippi, University, MS, for the Center for Thermal Pharmaceutical Processing.	500,000	Cochran
University of Nebraska Medical Center, Omaha, NE, for construction of a cancer floor.	900,000	Ben Nelson
University of Nebraska Medical Center, Omaha, NE, for construction, renovation and equipment at the College of Nursing in Lincoln, Nebraska.	200,000	Hagel, Ben Nelson
University of Nebraska Medical Center, Omaha, NE, for the NEED-IT program for statewide lung cancer screenings.	100,000	Hagel, Ben Nelson
University of Nevada Health Sciences System, Las Vegas, NV, for construction and equipment.	1,000,000	Reid
University of Nevada School of Medicine, Center for Molecular Medicine, Reno, NV, for the purchase of equipment and for construction.	1,500,000	Reid
University of Nevada, Las Vegas, NV, for construction at the School of Public Health.	600,000	Reid
University of New Mexico, Albuquerque, NM, for construction, renovation, and equipment.	3,750,000	Domenici

Project	Committee recommendation	Requested by
University of North Dakota School of Medicine and Health Services, Grand Forks, ND, for construction of a forensic facility.	1,500,000	Dorgan, Conrad
University of Pennsylvania, Philadelphia, PA, for equipment .....	200,000	Specter, Casey
University of Pittsburgh Cancer Institute, Pittsburgh, PA, for equipment .....	200,000	Specter
University of Pittsburgh Medical Center, Pittsburgh, PA, for equipment .....	100,000	Specter
University of South Alabama, Mobile, AL, for renovation and equipment .....	600,000	Sessions
University of South Dakota, Vermillion, SD, for biomedical laboratory facilities and equipment.	200,000	Johnson
University of South Dakota Sanford School of Medicine, Vermillion, SD, for medical equipment.	2,000,000	Johnson
University of Tennessee Health Science Center, Memphis, TN, for equipment at the regional biocontainment laboratory.	250,000	Alexander
University of Texas M.D. Anderson Cancer Center, Houston, TX, for equipment ..	500,000	Hutchison
University of Texas Medical Branch at Galveston, Galveston, TX, for equipment.	250,000	Hutchison
University of Washington, Seattle, WA, for the Bothell Nursing Faculty Consortium.	200,000	Cantwell
University of Wisconsin Oshkosh, Oshkosh, WI, for construction and equipment of a primary care facility.	150,000	Kohl
University of Wisconsin Superior, Superior, WI, for construction and equipment.	200,000	Kohl
Valley Baptist Health System, Harlingen, TX, for the Hispanic Stroke Care Center of Excellence for equipment.	200,000	Hutchison
Vermont Information Technology Leaders, Inc, Montpelier, VT, for health information technology.	500,000	Leahy
Village of Kiryas Joel, NY, for construction of a primary care clinic .....	150,000	Clinton, Schumer
Virginia Dental Health Foundation, Richmond, VA, for the Mission of Mercy project.	100,000	Warner, Webb
Virginia Primary Care Association, Richmond, VA, for health information technology.	200,000	Webb, Warner
WakeMed Health & Hospitals, Raleigh, North Carolina, for the Emergency Operations and Regional Call Center.	200,000	Dole
Washington State University, Seattle, WA, for construction and equipment at the College of Nursing.	1,500,000	Murray, Cantwell
Wayne Memorial Hospital, Honesdale, PA, for equipment .....	100,000	Specter
Wayne Memorial Hospital, Jesup, GA, for construction, renovation, and equipment.	100,000	Chambliss, Isakson
Wentworth-Douglass Hospital, Dover, NH, for equipment .....	450,000	Gregg, Sunune
Wesley College, Dover, DE, for the expansion of the nursing program .....	200,000	Carper, Biden
West Virginia University, for the construction and equipping of medical simulation research and training centers in Morgantown, Charleston and Martinsburg.	3,150,000	Byrd
West Virginia University, for the construction of a Multiple Sclerosis Center .....	4,050,000	Byrd
Westerly Hospital, Westerly, RI, for construction, renovation and equipment .....	500,000	Reed
Western Kentucky University Research Foundation, Bowling Green, KY, for the Western Kentucky University Mobile Health Screening Unit.	500,000	McConnell
Western Pennsylvania Hospital, Pittsburgh, PA, for construction .....	100,000	Specter
Wetzel County Hospital, WV, for the expansion and remodeling of the Emergency Department.	1,000,000	Byrd
Whitman Walker Clinic of Northern Virginia, Arlington, VA, for construction, renovation and equipment.	150,000	Webb, Warner
Wills Eye Health System, Philadelphia, PA, for equipment .....	100,000	Specter
Wistar Institute, Philadelphia, PA, for construction .....	100,000	Specter
Wolfson Children's Hospital, Jacksonville, FL, for equipment .....	500,000	Bill Nelson
Wyoming Health Resources Network, Inc., Cheyenne, WY, to expand recruitment and retention of medical professionals in Wyoming.	500,000	Enzi
Wyoming Valley Health Care System-Hospital, Wilkes-Barre, PA, for equipment.	100,000	Specter
Youth Crisis Center, Jacksonville, FL, for construction, renovation, and equipment.	100,000	Martinez, Bill Nelson

The Committee intends that these funds be disbursed as direct subsidy payments. The Committee directs HRSA to develop this program with appropriate safeguards to assure compliance by re-

ipients with the intended uses of these funds and with other applicable requirements, such as civil rights statutes and the National Historic Preservation Act. Further, the Committee intends that when these funds are used for purchase, construction or major alteration of real property or the purchase of equipment, the Federal interest in the property will last for a period of 5 years following the completion of the project or until such time that the Government is compensated for its proportionate interest in the property if the property use changes or the property is transferred or sold, whichever time period is less. At the conclusion of that time period, the Federal interest in that property shall be terminated.

The Committee has included bill language to terminate after 5 years the Federal interest in buildings and equipment funded in this line item. The Committee is aware of situations in which HRSA has had to track obsolete pieces of equipment, such as old medical equipment, for years after the useful life of the equipment has ended. The Committee is also aware of situations in which HRSA has had to track Federal interest of less than 2 percent of total value of a building for years after the completion of construction. The bill language should alleviate these unintended consequences of the grant process.

#### *Telehealth*

The Committee provides \$7,000,000 for telehealth activities. The fiscal year 2007 comparable level and the budget request for fiscal year 2008 were both \$6,819,000. The telehealth program funded through the Office for the Advancement of Telehealth promotes the effective use of technologies to improve access to health services for people who are isolated from healthcare and distance education for health professionals.

The Committee intends for HRSA to continue to carry out activities initiated in fiscal year 2006 related to the telehealth resource centers, network grants, telehomecare, and the programs under which health licensing boards or various States cooperate to develop and implement policies that will reduce statutory and regulatory barriers to telehealth.

#### *Program Management*

The Committee provides \$145,000,000 for program management activities for fiscal year 2008. The fiscal year 2007 comparable level was \$146,294,000 and the budget request for fiscal year 2008 was \$144,191,000.

The Committee commends HRSA for working with stakeholders to develop recommendations and implement cost effective clinical pharmacy services to improve patient health outcomes as components of federally qualified health centers, rural hospital programs, academic medical centers, Indian Health Service programs, Ryan White programs, and all HRSA supported programs in which medications play an integral part of patient care. The Committee looks forward to receiving a report of these activities. The Committee strongly encourages HRSA to continue to develop and implement cost effective clinical pharmacy programs in all of the various safety net provider settings.

The Committee further encourages HRSA to establish a pharmacy collaborative to identify and implement best practices, which may improve patient care by establishing the pharmacist as an integral part of a patient-centered, interprofessional health care team.

HEALTH EDUCATION ASSISTANCE LOANS

The Committee provides \$1,000,000 to liquidate obligations from loans guaranteed before 1992. The fiscal year 2007 comparable level was \$4,000,000 and the budget request for fiscal year 2008 was \$1,000,000. For administration of the HEAL program including the Office of Default Reduction, the Committee provides \$2,906,000. The fiscal year 2007 comparable level was \$2,898,000 and the budget request for fiscal year 2008 was \$2,906,000.

The HEAL program insures loans to students in the health professions. The Budget Enforcement Act of 1990, changed the accounting of the HEAL program. One account is used to pay obligations arising from loans guaranteed prior to 1992. A second account was created to pay obligations and collect premiums on loans guaranteed in 1992 and after. Administration of the HEAL program is separate from administration of other HRSA programs.

NATIONAL VACCINE INJURY COMPENSATION PROGRAM

The Committee provides that \$61,075,000 be released from the vaccine injury compensation trust fund in fiscal year 2008, of which \$3,528,000 is for administrative costs. The total fiscal year 2007 comparable level was \$59,853,000 and the total budget request for fiscal year 2008 was \$61,075,000.

The National Vaccine Injury Compensation program provides compensation for individuals with vaccine-associated injuries or deaths. Funds are awarded to reimburse medical expenses, lost earnings, pain and suffering, legal expenses, and a death benefit. The vaccine injury compensation trust fund is funded by excise taxes on certain childhood vaccines.

CENTERS FOR DISEASE CONTROL AND PREVENTION

DISEASE CONTROL, RESEARCH, AND TRAINING

Appropriations, 2007 .....	\$6,202,672,000
Budget estimate, 2008 .....	5,982,651,000
Committee recommendation .....	6,426,833,000

The Committee provides a program level of \$6,426,833,000 for the Centers for Disease Control and Prevention [CDC]. The Committee recommendation includes \$6,157,169,000 in budget authority and an additional \$269,664,000 via transfers available under section 241 of the Public Health Services Act. The fiscal year 2007 comparable program level was \$6,202,672,000 and the program level budget request for fiscal year 2008 was \$5,982,651,000.

The Committee notes that an additional \$158,000,000 is appropriated within the Public Health and Social Services Emergency Fund in this act and will be transferred to the CDC for activities to prepare for an influenza pandemic. These amounts are included in the President's request for CDC, but not in the Committee recommendation figures below. Including the pandemic funding, the

comparable fiscal year 2008 programmatic amount total for CDC would be \$6,584,513,000.

The activities of the CDC focus on several major priorities: provide core public health functions; respond to urgent health threats; monitor the Nation's health using sound scientific methods; build the Nation's health infrastructure to insure our national security against bioterrorist threats; assure the Nation's preparedness for emerging infectious diseases and potential pandemics; promote women's health; and provide leadership in the implementation of nationwide prevention strategies to encourage responsible behavior and adoption of lifestyles that are conducive to good health. All comparisons to fiscal year 2007 and the fiscal year 2008 budget request account for various reprogrammings and rescissions. These are not reflected in the table at the back of this report.

#### INFECTIOUS DISEASES

The Committee recommends \$1,774,877,000 for infectious disease related programs at the CDC. The fiscal year 2007 comparable level was \$1,804,231,000 and the comparable budget request level for fiscal year 2008 was \$1,794,368,000. The Committee recommendation includes \$12,794,000 in transfers available under section 241 of the Public Health Services Act.

The Coordinating Center for Infectious Disease reorganized in fiscal year 2007. The new four center structure includes: Zoonotic, Vector Borne, and Enteric Diseases; Preparedness, Detection and Control of Infectious Diseases; HIV/AIDS, Viral Hepatitis, STD and TB Prevention; and Immunization and Respiratory Diseases.

#### *Zoonotic, Vector Borne, and Enteric Diseases*

The Committee has included \$70,070,000 for fiscal year 2008 for this center. The fiscal year 2007 level was \$70,070,000 and the 2008 budget request was \$62,952,000. This Center provides outbreak investigation, infection control and scientific evaluations of zoonotic, vector borne and enteric diseases; and conducts food-borne illness surveillance and investigation. All activities in this Center have been funded at last year's level.

*Chronic Fatigue Syndrome.*—The Committee has included funding to continue a public awareness campaign on chronic fatigue syndrome. The Committee also commends the excellent work of the CDC's CFS research program and its systems biology approach to CFS and understands that it is recognized as a leading program globally. The Committee awaits reports from CDC regarding how the organizational restructuring will impact the CFS program and how CDC will address emerging evidence concerning human herpesvirus 6A and Epstein-Barr virus and CFS.

*Food Safety.*—The Committee notes that 76 million Americans suffer from food borne illnesses each year and the CDC coordinates with State and local health officials to respond to the most severe outbreaks. The Committee is concerned by recent E. coli outbreaks linked to spinach and lettuce, and urges the CDC to work with the Food and Drug Administration to prevent future outbreaks.

*Morgellons Disease.*—The Committee urges the Centers for Disease Control and Prevention to study an unexplained skin condition commonly known as Morgellons Disease, which affects over

10,000 individuals with skin lesions, joint pain, and neurological difficulties, among other symptoms. The Committee encourages the Centers for Disease Control and Prevention to work as quickly as possible to plan and begin this important research to increase the amount of information available to practitioners and the public.

*West Nile Virus.*—The Committee is aware of the active role that State laboratories play in testing for west Nile virus. This highly seasonal activity is at the forefront of the public's interaction with local health departments and labs. The Committee strongly supports these efforts and has rejected the proposed cut to these important activities.

*Preparedness, Detection and Control of Infectious Diseases*

The Committee has included \$156,966,000 for fiscal year 2008 for this Center. The comparable level for fiscal year 2007 was \$155,966,000 and the budget request for fiscal year 2008 was \$129,641,000. This Center builds epidemiology and laboratory capacity and provides technical assistance to identify and monitor infectious diseases. With the exception noted below, all activities in this Center are funded at the same level as the 2007 operating plan.

*Antimicrobial Resistance.*—The Committee is aware that infectious pathogens such as methicillin-resistant *Staphylococcus aureus* [MRSA] are rapidly gaining new forms of resistance to available antimicrobial drugs. The Committee commends the CDC for its work in tracking trends over time in community acquired MRSA [CA-MRSA] and urges the CDC to continue supporting this surveillance effort. The Committee further encourages the CDC to strengthen research on CA-MRSA prevention, control and treatment strategies, including the expansion and routinization of it collection of isolates of resistant pathogens from a broad range of sites for analysis by CDC experts. Finally, the Committee encourages the CDC to post timely and pertinent information available to the public through its website.

*Emerging Infectious Diseases.*—The Committee provides \$136,671,000 for all other emerging infectious diseases. This increase of \$1,000,000 will provide sufficient resources to expand laboratory capacity, research and support for detecting and characterizing influenza and other infectious diseases.

*Prevention Epicenter Program.*—The Committee applauds CDC's support for the Prevention Epicenter Program and has provided sufficient resources to continue this program to address patient safety issues.

*HIV, Viral Hepatitis, STD, and TB Prevention*

The Committee has included \$1,020,191,000 for the activities at this Center in fiscal year 2008. The fiscal year 2007 level was \$1,010,191,000 and the 2008 budget request was \$1,056,798,000. Recognizing the intersection among these diseases, and the need for a focal point for leadership and accountability, CDC combines HIV, STD, Viral Hepatitis, and TB activities to provide leadership in preventing and controlling human immunodeficiency virus infection, other sexually transmitted diseases [STDs], and tuberculosis. CDC works in collaboration with partners at community, State, na-

tional, and international levels, applying multi-disciplinary programs of research, surveillance, technical assistance, and evaluation. These diseases are not yet vaccine preventable and must be controlled and prevented by identifying, diagnosing, and treating infected persons; providing confidential, culturally competent counseling to identify and reach those who have been exposed to infection and who may not know it; and promoting individual and population level health to reduce high risk behaviors. With the exception of an additional \$10,000,000 for TB prevention activities, the Committee has provided funding at the level of the fiscal year 2007 operating plan.

*Hepatitis and Diversity.*—The Committee continues to be concerned with the high prevalence of hepatitis among Asian Americans. One out of ten Asian Americans are affected with hepatitis B, which along with hepatitis C is associated with an increased incidence of liver cancer. The Committee encourages the CDC to develop targeted research and approaches towards the Asian American community in its work on hepatitis.

*Hepatitis B.*—The Committee applauds CDC's efforts to develop and implement a new strategy to screen at risk individuals for chronic hepatitis B. As only approximately one-third of individuals with hepatitis B are aware of their condition, the Committee urges CDC to continue to collaborate with NIDDK in the development of a public health strategy to expand the screening of individuals at risk for chronic hepatitis B. In addition, the Committee notes that accurate national statistics are lacking as to the number of Americans infected with hepatitis B, as existing population-based surveys have not included Asian/Pacific Islander groups in whom hepatitis B is by far the most common. The Committee urges CDC to continue to implement the recommendations of the National Hepatitis C Prevention strategy and the report of the National Viral Hepatitis roundtable.

*Hepatitis C.*—The Committee notes that, as 2008 will be the 10th anniversary of the National Hepatitis C Prevention Strategy, this plan may need to be reviewed and updated. The Committee continues to be concerned that less than half the people infected with hepatitis C are aware of their condition, and encourages any update of the strategy to include an aggressive screening program. In addition to targeting at-risk populations, the Committee encourages the consideration of age based screening policies to more effectively reach infected populations.

*Hepatitis Prevention.*—The Committee continues to be concerned about the prevalence of hepatitis and urges CDC to promote liver wellness with increased attention to childhood education and primary prevention.

*HIV/AIDS Initiative.*—The Committee is strongly supportive of the HIV/AIDS initiative begun in fiscal year 2007 and has included sufficient funding to maintain that effort within CDC's HIV/AIDS-related activities. Although approximately 1 million Americans have been infected with HIV, approximately 25 percent are unaware of their infection. This results in increased spread of the disease, as persons who are aware of their infection are more likely to modify their behaviors to avoid transmission to others. The Committee notes that quick HIV tests that can provide results in less

than an hour are a critical component of the initiative. The Committee continues to support bulk purchases of HIV quick tests for distribution to providers.

In fiscal year 2007, the Committee provided no funding for the Early Diagnosis and Screening program authorized in section 2625 of the Public Health Service Act because no State was eligible for the program. The Committee is aware of legislation pending in several States that may qualify those States for funding under this program. Therefore, the Committee has provided \$30,000,000 for the program within HIV prevention funding, should States become eligible.

*Infertility Prevention.*—The Committee notes that there are multiple causes for infertility including ovulatory and hormonal disorders, blocked fallopian tubes, endometriosis and cervical problems among women and poor sperm quality, motility and count among men. There are also recognized risk factors that contribute to these causes in addition to sexually transmitted diseases, which have been the primary focus of CDC's education on infertility risks. These factors include delayed child bearing, smoking, low or excessive body weight and other chronic conditions, exposures to hazardous environmental toxins and contaminants, drug and alcohol abuse, diabetes, cancer and, particularly for men, exposure to high temperatures. The Committee encourages CDC to consider expanding the scope of this program and provide greater support to public education on the risks to fertility.

*Tuberculosis.*—The Committee understands that tuberculosis [TB] is an enormous health crisis in the developing world, killing 2 million people every year. Despite the development of effective treatments against TB 50 years ago, approximately a third of the world's population is currently infected.

At a recent hearing, the Committee heard testimony about current testing methods that take 6 to 16 days to correctly diagnose the presence of TB bacteria. The Committee is concerned by this long delay. The Department of Defense has been working on biological and chemical detection and identification technology that can confirm the presence of specific bacteria in just 2 hours. This technology is currently being developed to identify chemical and biological threat agents but may be adapted for use in medical diagnosis. The Committee encourages the CDC to work with the Department of Defense and the National Institutes of Health to develop new diagnostic tools to identify TB more rapidly.

*Drug Resistant Tuberculosis.*—The Committee has heard testimony about drug resistant tuberculosis and extensively drug resistant TB [XDR-TB]. The Committee is concerned that the underfunding of TB treatment programs worldwide is contributing to this dangerous illness. The Committee has included \$10,000,000 over the fiscal year 2007 operating plan for TB in an effort to shore up the public health efforts to prevent TB in general and its progression into XDR-TB. The Committee remains hopeful about the ability of the United States to meet its TB elimination goals.

The Committee understands that Phase II of CDC's new formula under the TB Elimination and Laboratory Cooperative Agreements is scheduled to be implemented in fiscal year 2008. The Committee

expects the CDC to implement Phase II within the increase provided.

*Immunization and Respiratory Diseases*

The Committee has included a program level of \$527,650,000 for the activities of this Center in fiscal year 2008. The comparable level for fiscal year 2007 was \$568,004,000 and the budget request included \$544,977,000 for this Center. The Committee notes that the fiscal year 2007 level and budget request for 2008 include funding to prepare for an influenza pandemic, an activity that the Committee has chosen to fund through the Public Health and Social Service Emergency Fund. This Center supports the immunization efforts of States by purchasing vaccines and supporting infrastructure; building domestic and international capacity to address annual influenza; and continuously monitoring vaccines for safety. With the exception of influenza activities noted below, all of the activities of this Center are funded at the 2007 comparable level.

The Committee recommends \$457,523,000 for the program authorized under section 317 of the Public Health Service Act. The fiscal year 2007 comparable level was \$457,523,000 and the budget request for fiscal year 2008 was \$425,123,000. The Committee recommendation includes \$12,794,000 in transfers available under section 241 of the Public Health Service Act.

The Omnibus Reconciliation Act of 1993 established a vaccine purchase and distribution system that provides, free of charge, all pediatric vaccines recommended for routine use by the Advisory Committee on Immunization Practices to all Medicaid-eligible children, uninsured children, underinsured, and native Americans through program-registered providers.

Immunization project grants are awarded to all 50 States, six cities and eight current or former territories for planning, developing, and conducting childhood immunization programs including enhancement of the vaccine delivery infrastructure. CDC directly maintains a stockpile of vaccines, supports consolidated purchase of vaccines for State and local health agencies, and conducts surveillance, investigations, and research into the safety and efficacy of new and presently used vaccines.

The Committee understands that infrastructure costs of delivering vaccines to children in remote areas are substantially higher than in other areas of the country, because of the distances that must be traveled to administer the vaccine. Some communities are so remote, they must be served primarily by air, dramatically increasing the cost of each dose. The Committee encourages CDC to increase section 317 grant support for infrastructure development and purchase of vaccines for States facing these extreme challenges.

*Adolescent and Adult Immunizations.*—The Committee recognizes the success that vaccines research and development, as well as a strong national immunization program, have played in protecting children, adolescents, and adults against many previously life-threatening and debilitating infectious diseases. The section 317 program, overseen by CDC's National Center for Immunization and Respiratory Diseases, has demonstrated success by helping to raise childhood immunization coverage rates across the United

States to their highest levels. The Committee recognizes that States have not been able to direct sufficient resources toward adult immunization despite extremely high rates of vaccine-preventable deaths among adults. Moreover, States now face increased challenges in expanding coverage rates as several new, and expensive, vaccines are becoming available for all age groups.

The Committee is pleased with the report on the 317 program that CDC provided, and expects the report to be updated and promptly submitted next year by February 1, 2008, to reflect fiscal year 2009 cost estimates. The updated report should also include an estimate of optimum State and local operations funding as well as CDC operations funding needed relative to current levels to conduct and support childhood, adolescent and adult programs. This estimate should include the cost of vaccine administration; surveillance and assessment of changes in immunization rates; vaccine storage, handling and quality assurance; implementation of centralized vaccine distribution and other vaccine business improvement practices; needs to support provider and public outreach and education on new vaccines; identification of barriers to immunization and strategies to address such barriers; maintenance, utilization, and enhancement of Immunization Information Systems [IIS] including integration with public health preparedness and other public health information technology systems; innovative strategies to increase coverage rates in hard-to-reach populations and geographic pockets of need; and other non-vaccine resource needs of a comprehensive immunization program. Each of these activities is critical to ensuring the delivery of life-saving vaccines to our nation. The Committee urges CDC to consider integrating the data from this report into its budget justification on an annual basis.

*Influenza.*—The Committee includes \$7,311,000 for influenza activities in fiscal year 2008. This funding level is not intended to support the pandemic flu activities that were requested in the President's budget, as the Committee has appropriated all pandemic flu activities out of the Office of the Secretary Public Health and Social Services Emergency Fund.

#### HEALTH PROMOTION

The Coordinating Center for Health Promotion includes the National Center for Chronic Disease Prevention and Health Promotion and the National Center for Birth Defects and Developmental Disabilities.

The Committee recommends \$979,876,000 for Health Promotion-related activities at the CDC. The fiscal year 2007 comparable level was \$959,662,000 and the budget request for fiscal year 2008 was \$958,732,000.

The Committee recognizes the important role national non-governmental health organizations play in increasing the awareness of chronic disease prevention and birth defects and development disabilities issues.

#### CHRONIC DISEASE PREVENTION AND HEALTH PROMOTION

The Committee has recommended \$851,180,000 for chronic disease prevention and health promotion. The comparable level for fiscal year 2007 was \$834,998,000 and the budget request for 2008

was \$834,195,000. Within the total provided, the following amounts are available for the following categories of funding above the comparable amount for fiscal year 2007: \$4,431,000 to expand heart disease and stroke-related activities; \$2,000,000 to expand diabetes-related activities; \$19,228,000 to expand cancer prevention and control activities; \$1,000,000 to expand epilepsy and lupus-related activities; \$2,000,000 to expand tobacco-related activities; \$3,000,000 for nutrition physical activity and obesity; \$775,000 to expand health promotion activities; \$50,000 to expand safe motherhood and infant health activities; \$500,000 for prevention centers; and \$497,000 for Primary Immune Deficiency Syndrome. The Committee has included more specific information regarding the allocation of these increases below. With the exceptions noted, the Committee has provided funding at the level of the fiscal year 2007 operating plan.

Chronic diseases have had a profound human and economic toll on our Nation. Nearly 125 million Americans today are living with some form of chronic condition, including cancer, cardiovascular disease, diabetes, arthritis, and various neurological conditions such as epilepsy. These and other chronic diseases now account for nearly 70 percent of all healthcare costs, as well as 70 percent of all deaths annually. A few modifiable risk factors bring suffering and early death to millions of Americans. Three such factors—tobacco use, poor nutrition, and lack of physical activity—are major contributors to our Nation's leading causes of death.

*Alzheimer's Disease and Healthy Aging.*—There is growing scientific evidence that many of the same strategies that preserve overall health may also help prevent or delay the onset of Alzheimer's disease and dementia. For example, epidemiological studies appear to link known risk factors for diabetes and heart disease with those for Alzheimer's disease. Within the health promotion increase, the Committee has provided \$150,000 over the fiscal year 2007 level to continue CDC-supported activities to promote brain health and prevent Alzheimer's disease.

*Cancer Prevention and Control.*—The Committee is strongly supportive of the CDC cancer programs focused on awareness, education, and early detection and has included a significant increase for these programs.

Within the amounts provided, the following amounts are provided for the specified activities above the comparable amount for fiscal year 2007: \$10,000,000 to expand breast and cervical cancer activities including \$6,535,000 to expand Wisewoman; \$9,133,000 to expand comprehensive cancer activities and \$100,000 to expand activities related to cancer survivorship. All other cancer activities are funded at the fiscal year 2007 level.

*Colorectal Cancer.*—The Committee is pleased with the leadership of CDC's National Colorectal Cancer Roundtable in promoting the availability and advisability of screening to both health care providers and the general public.

*Cerebral Palsy.*—The Committee is aware of new research into the prevalence of cerebral palsy in cases of preterm birth, which may indicate a potential correlation between cerebral palsy rates and neonatal treatments. This type of research highlights the need for epidemiologic data on cerebral palsy. The Committee requests

a report by July 31, 2008 on what types of data are most needed for a public health response to cerebral palsy and the strengths and weaknesses of the various methods of collecting epidemiologic data in this population. As part of that report, the Committee encourages the CDC to consider establishing cerebral palsy surveillance and epidemiology systems that would work in concert with similar disorders.

*Chronic Kidney Disease.*—The Committee previously has expressed concern regarding the need to expand public health strategies to combat chronic kidney disease [CKD] given that many individuals are diagnosed too late to initiate treatment regimens that could reduce morbidity and mortality. The Committee has included \$175,000 over the 2007 operating plan within the health promotion increase to continue planning for capacity and infrastructure at CDC for a kidney disease epidemiology, research and outcomes program and to institute a CKD surveillance system. The Committee encourages CDC to continue development of a Public Health Strategy for Chronic Kidney Disease.

*COPD Self Management Demonstration.*—The Committee is aware that Chronic Obstructive Pulmonary Disease [COPD] is a chronic condition similar to diabetes that requires an aggressive self-management in order to prevent continued deterioration, hospitalization, and costly medical interventions. In view of the increasing mortality, morbidity, and cost to the Nation's health care system, the Committee urges CDC to demonstrate and validate intervention and training protocols that are needed to improve health outcomes and reduce health care costs for COPD patients.

*Diabetes.*—The Committee has included an increase of \$2,000,000 over the fiscal year 2007 level for diabetes-related activities. Approximately 14.6 million Americans have diabetes, and an estimated 6.2 million people are undiagnosed and therefore untreated. The Committee encourages CDC to conduct public awareness campaigns aimed at getting at-risk individuals to identify the stage of their diabetes and to prevent or slow the progression of their disease. In particular, the Committee is pleased with CDC's goal to increase the percentage of individuals with diabetes who receive annual eye and foot exams, and at least two A1C measures per year.

It is estimated that maintaining a certain blood glucose level (A1C target of 7 or below) would reduce complications of diabetes. The Committee encourages CDC to expand diabetes education activities to encourage individuals to be tested and know their A1C levels so they can take appropriate steps to control their conditions.

*SEARCH Study.*—The Committee applauds the CDC and NIDDK for their strong support and continuation of the Search for Diabetes in Youth Study [SEARCH] which has, for the first time, assembled robust data on the epidemic of type 1 and type 2 diabetes in American youth. The Committee encourages the CDC to expand this important work, including the consideration of ancillary studies and innovative analyses on the biosamples collected through SEARCH.

*Diabetes and Obesity in Diverse Populations.*—The Committee is concerned about the adverse health toll that the twin epidemics of diabetes and obesity are taking across the Nation. An informed and

culturally sensitive response is urgently needed to address this escalating epidemic. The Committee encourages CDC to fund projects of national and community organizations that have the capacity to carry out coordinated health promotion programs that will focus on diabetes and obesity in the general population and across minority communities. The Committee further encourages CDC to identify potential grantee organizations directed by and serving individuals from communities with disproportionate diabetes and obesity rates.

The high incidence of diabetes among Native American, Native Alaskan, and Native Hawaiian populations persists. The Committee is pleased with the CDC's efforts to target these populations. It is important to incorporate traditional healing concepts and to develop partnerships with community health centers. The Committee encourages CDC to build on all its historical efforts in this regard.

*Diabetic Kidney Disease.*—The Committee strongly encourages the CDC to work closely with the National Institute of Diabetes, Digestive and Kidney Diseases to ensure that the biosamples and data from the Genetics of Kidneys in Diabetes collection are made available to the research community in a timely and efficient manner.

*Eating Disorders.*—The Committee is concerned about the increasing prevalence of eating disorders affecting 8 to 10 million Americans. Research suggests that for females between 15 and 24 years of age, the mortality rate associated with anorexia nervosa is 12 times higher than for all other causes of death. The Committee urges the CDC to implement data collection regarding the morbidity and mortality of anorexia nervosa, bulimia nervosa, and related eating disorders so that prevention and treatment strategies may be most effective.

*Epilepsy.*—The Committee strongly supports the CDC epilepsy program, which has made considerable progress over the past decade in establishing and advancing a public health agenda to meet the needs of Americans with epilepsy. The Committee applauds CDC's activities to train first-responders, educators, school nurses, employers, family caregivers and other health care professionals in the recognition, diagnosis and treatment of seizures. The Committee provides \$500,000 over fiscal year 2007 levels to continue efforts to expand public health activities on behalf of persons with epilepsy.

*Food Allergy and Anaphylaxis Information.*—The Committee encourages CDC to create an information center on food allergy and anaphylaxis. Food allergy is the leading cause of anaphylaxis (a severe, potentially life-threatening allergic reaction) outside the hospital setting, virtually all of which can be prevented with proper education. The Committee encourages the CDC to create a Center that will provide guidance to the public and health care professionals about how to avoid products with allergy-causing ingredients and how to respond to potentially life-threatening reactions to food allergens.

*Glaucoma and Other Vision Disorders.*—Despite the fact that half of all blindness can be prevented, it is estimated that the number of blind and visually impaired people will double by 2030 if nothing is done to curb vision problems. Within the increase for

health promotion activities, the Committee has included an increase of \$125,000 to expand vision screening programs in preventing blindness and vision impairments among many of the more than 30 million adults that suffer from eye-related disorders.

In addition, the Committee is encouraged by the CDC's exploration of strategies to implement a national initiative to combat the effects of eye-related disorders, especially glaucoma. Within the health promotion increase, the Committee has included an increase of \$125,000 for the expansion of vision screening and education programs and to evaluate the efficacy of glaucoma screening using mobile units.

*Gynecologic Cancer Education and Awareness Program.*—The Committee is encouraged by the progress that has been made by CDC, in coordination with the Office of Women's Health at the Public Health Service, to initiate a national education campaign on Gynecologic Cancers. The Committee strongly urges the rapid completion of the evaluation of past and present activities to increase the awareness and knowledge regarding gynecologic cancers and the creation of a strategy for improving efforts to increase awareness and knowledge of the public and health care providers with respect to gynecological cancers.

*Heart Disease and Stroke.*—The Committee remains strongly supportive of CDC's new Division for Heart Disease and Stroke Prevention and has included \$4,431,000 over the fiscal year 2007 level to support and expand its work. Heart disease, stroke and other cardiovascular diseases continue to be the leading cause of death in every state; however, effective prevention efforts are not practiced universally. Additionally, the current surveillance systems in the United States cannot track our progress towards achieving our Healthy People 2010 goals to reduce the epidemic burden of heart disease and stroke.

The Mississippi Delta Region experiences some of the Nation's highest rates of chronic diseases, such as diabetes, hypertension, obesity, heart disease, and stroke. The Committee recognizes CDC's expertise in implementing research and programs to prevent the leading causes of death and disability. The Committee is aware that CDC has been conducting a background community assessment of health and related social and environmental conditions in the delta. The Committee has provided \$2,000,000 within the program, for CDC to continue and expand these activities (Requested by Senator Cochran).

*Inflammatory Bowel Disease.*—The Committee understands that up to 1.4 million people in the United States may suffer from Crohn's disease or ulcerative colitis, collectively known as inflammatory bowel disease [IBD]. Within the health promotion increase, the Committee has included \$100,000 over the fiscal year 2007 operating plan level for these activities.

*Interstitial Cystitis.*—The Committee understands the burden of lack of information regarding interstitial cystitis and supports the continuation of these activities at \$100,000 over the fiscal year 2007 funding level within the health promotion increase.

*Lupus.*—The Committee recognizes that lupus is a serious, complex, debilitating chronic autoimmune disease that can cause inflammation and tissue damage to virtually any organ system in the

body and impacts between 1.5 and 2 million individuals. The Committee is concerned by the lack of reliable epidemiological data on the incidence and prevalence of all forms of lupus among various ethnic and racial groups. The Committee has included \$500,000 over the fiscal year 2007 operating plan level to continue and expand CDC's lupus-related activities.

*Mind-Body Research.*—The Committee continues to support mind-body research. The Committee supports this activity at the 2007 funding level.

*Nutrition, Physical Activity, and Obesity.*—The Committee has included \$3,000,000 over the fiscal year 2007 level for nutrition, physical activity, and obesity activities. The Committee understands that the multiple factors contributing to the overweight and obesity epidemic took years to develop. Reversing the epidemic will require a long-term, well-coordinated, concerted approach to reach Americans where they live, work, play, and pray. Effective collaboration among the public, voluntary, and private sectors is critical to reshape the social and physical environment of our Nation's communities and provide the necessary support, information, tools, and realistic strategies needed to reverse the current obesity trends nationwide.

Given the large, preventable health and economic burden of poor nutrition, physical inactivity, and unhealthy body weight, the Committee encourages CDC to continue its leadership role in developing, implementing, and evaluating nutrition and physical activity population-based strategies to prevent and control overweight and obesity. Targeting prevention efforts throughout the lifespan—including children as young as toddlers—as well as promoting fruit and vegetable consumption through CDC's Federal lead role in the national 5 A Day program, and increasing the proportion of children, adolescents, and adults who meet daily physical activity recommendations should remain priorities for the agency. The Committee has provided \$1,000,000 above the fiscal year 2007 level to sustain and expand CDC's support of the 5 A Day Program.

*Nutrition and Physical Activity Study.*—Within the amount provided for Nutrition, Physical Activity and Obesity, the Committee has provided sufficient funds to conduct a study of the impact of school nutrition and physical activity programs on academic outcomes, including school attendance, student behavior, and student achievement on standardized tests.

*Nutrition and Salt Study.*—Within the amount provided for Nutrition, Physical Activity and Obesity, the Committee has provided \$1,000,000 for a study by the Institute of Medicine of the National Academy of Sciences that will examine and make recommendations regarding various means that could be employed to reduce dietary sodium intake to levels recommended by the Dietary Guidelines for Americans. These should include, but not be limited to, actions by food manufacturers, such as new product development and food reformulation, and governmental approaches, such as regulatory, legislative approaches, and public and professional information and education.

The Committee continues to be concerned with the prevalence of obesity among Native Hawaiians. The Committee urges the CDC to use culturally-sensitive methods to promote diet, exercise, and

healthy behaviors in children, adolescents, and adults, particularly among Native Hawaiians.

*Office on Smoking and Health.*—For years the Committee has expressed its strong support for OSH's work to reduce tobacco use, the leading preventable cause of disease and death in America. The Committee recognizes that efforts to reduce smoking and other forms of tobacco use are among the most effective and cost effective investments in prevention that can be made. As a part of its efforts to improve health and reduce health care costs through prevention, the Committee has increased funding for OSH by \$2,000,000 over the fiscal year 2007 level.

In light of renewed efforts to more appropriately regulate tobacco products and to take better advantage of CDC's unique laboratory capacity, the Committee intends that the increase in funding for OSH be used to support a substantially stepped up effort by the Environmental Health Laboratory to analyze tobacco products and cigarette smoke. These efforts are essential to providing critical information about how chemical make-up and product design influence the health consequences of tobacco products and how chemical additives, constituents and design affect the toxicity and addictiveness of tobacco products and the delivery of nicotine, carcinogens and other toxic substances.

*Oral Health.*—The Committee recognizes that to effectively reduce disparities in oral disease will require improvements at the State and local levels. The Committee has provided sufficient funding to States to maintain their capacities to assess the prevalence of oral diseases, to target interventions, such as additional water fluoridation and school-linked sealant programs, and resources to the underserved, and to evaluate changes in policies, programs, and disease burden. The Committee encourages the CDC to advance efforts to reduce the disparities and health burden from oral cancers that are closely linked to chronic diseases such as diabetes and heart disease.

*Pioneering Healthier Communities.*—The Committee has provided sufficient funding to support the Pioneering Healthier Communities initiative as proposed in the President's budget, but at the same funding level as in fiscal year 2007.

*Prevention Centers.*—The Committee encourages the continued support of center activities aimed at improving knowledge about the effective models for health promotion programs for persons with disabilities. The Committee has included \$500,000 above the 2007 operating plan for these centers.

*Primary Immunodeficiency Diseases.*—The Committee has included \$497,000 over the fiscal year 2007 level for CDC to support a national physician education and public awareness campaign, including a targeted outreach to underserved communities, featuring public service announcements, physician symposia, publications, a website and educational materials, and mailings to physicians, school nurses, daycare centers, and others. The Committee is pleased that the current campaign has generated more than \$75,000,000 in donated media coverage and other contributions over 3 years, or about 10 private dollars for every public dollar invested. This has directly resulted in a three-fold increase in diagnosis, testing and treatment since the campaign began.

*Prostatitis.*—The committee encourages the CDC to consider expanding its investigation of the etiology of prostatitis.

*Public Health Genomics.*—The coming era of personalized medicine has broad applicability for the field of public health. The Committee urges CDC to conduct and sponsor public health genomics research and develop appropriate programs to identify people at risk for disease and early death. CDC is further urged to use genomic information to provide targeted and personalized interventions that will prevent disease, disability, and death, and may ultimately save public resources.

*REACH Initiative.*—The Committee recognizes the strengths that national/multi-geographical minority organizations may be able to provide to the REACH Initiative. Such organizations could have the capacity to influence communities through pre-existing coalitions and collaborative relationships. Such organizations may also be able to provide key support to local organizations that may lack the infrastructure needed to fully implement the programmatic activities required for this important program. The Committee urges CDC to include such organizations among the entities that are eligible to compete for funding without preventing other applicants from receiving these grants.

*Preterm Birth.*—Preterm birth is a serious and growing public health problem that occurs in 12.5 percent of all births in the United States. The Committee encourages the CDC to conduct additional epidemiological studies on preterm birth, including the relationship between prematurity, birth defects and developmental disabilities. The Committee also encourages the establishment of systems for the collection of maternal-infant clinical and biomedical information to link with the Pregnancy Risk Assessment Monitoring System [PRAMS] and other epidemiological studies of prematurity in order to track pregnancy outcomes and prevent preterm birth.

*Sleep Disorders.*—The Committee is pleased with the activities of the National Sleep Awareness Roundtable. The Committee encourages the CDC to continue activities to promote public awareness of the benefits of sleep.

*Steps to a Healthier United States.*—The Committee applauds the Department's continued commitment to tackling the problems of obesity, diabetes, and asthma. The Committee agrees that these are three of the most critical chronic conditions afflicting Americans. The Committee is concerned that existing programs that address these problems have not yet been implemented in all of the States. The Committee has provided the President's request level to continue this initiative and existing programs within CDC that are aimed at obesity, diabetes, and asthma. The Committee strongly urges CDC to coordinate the efforts of these programs such that the best possible outcome is achieved using these limited funds.

*Sudden Infant Death Syndrome.*—To prevent Sudden Infant Death Syndrome [SIDS], the Committee has included \$261,000 for SIDS prevention activities. In addition, the Committee encourages CDC to consider supporting a National Campaign for Cribs pilot program. Such a pilot project may be composed of a public health education component for new parents and caregivers and seek to

provide a crib for babies whose mothers and caregivers cannot afford a proper sleeping environment for their children.

BIRTH DEFECTS, DEVELOPMENTAL DISABILITIES, DISABILITY AND HEALTH

The Committee has included \$128,696,000 for birth defects, developmental disabilities, disability and health in fiscal year 2008. The comparable level for 2007 was \$124,664,000 and the 2008 budget request was \$124,537,000.

Within the total provided, the following amounts are provided above the comparable amount for fiscal year 2007 for the following categories of funding: \$200,000 for craniofacial malformation; \$3,782,000 for activities within Human Development and Disability; and \$50,000 for Cooley's Anemia programs. With the exceptions noted, all other programs are funded at the level of the fiscal year 2007 request.

*Attention Deficit/Hyperactivity Disorder.*—Within human development and disability funding, the Committee has included an increase of \$100,000 to support and expand activities designed to provide information, support services and health professional education regarding attention deficit/hyperactivity disorder.

*Autism.*—The Committee is aware of the progress that has been made with the autism programs at CDC. The Committee acknowledges the importance of this work by the CDC in the area of autism surveillance and research, and urges this work to continue in a timely manner. Within the human development and disability increase, the Committee has included \$1,407,000 over the fiscal year 2007 level to continue the Center's surveillance and research programs, including the CADDRE and ADDM Network and the National awareness campaign.

*Blood Disorders.*—The Committee has provided sufficient funding to sustain the hereditary blood disorders programs, including treatment centers, at the fiscal year 2007 levels. The Committee requests strategic plan of action regarding research, outreach activities, and resources needed to address key blood disorders. In preparing this report, CDC should seek input from patient and physician organizations, research scientists, and public health officials.

*Centers for Birth Defects Research and Prevention.*—The Committee encourages CDC to consider expanding the promising research being conducted by the regional Centers for Birth Defects Research and Prevention and maintain assistance to States to implement and expand community-based birth defects tracking systems, programs to prevent birth defects, and activities to improve access to health services for children with birth defects.

*Birth Defects Research, Surveillance and Prevention.*—The Committee understands that birth defects are a leading cause of infant mortality and about 120,000 babies are born each year with a birth defect. Both genetic and environmental factors can cause a birth defect, however the causes of 70 percent of birth defects are unknown. The Committee supports CDC's efforts in the area of birth defects surveillance, research and prevention and encourages CDC to continue the promising research being conducted by the regional centers for birth defects research and prevention. The Committee has included sufficient funding to maintain the current level for

states to continue birth defects surveillance systems, programs to prevent birth defects and activities to improve access to health services for children with birth. The Committee encourages the CDC to expand the birth defects studied in the National Birth Defects Prevention Study to include single gene disorders [SGD], like Fragile X. Although these disorders are rare individually, when grouped together they affect approximately 1 in 300 births.

*Cooley's Anemia.*—The Committee remains pleased with the progress that CDC has made in the establishment of a blood safety surveillance program for Cooley's anemia patients, who are the largest consumers of red blood cells. Six treatment centers throughout the Nation handle the medical monitoring and treatment; education and awareness, patient recruitment, and other services are being provided; and CDC has created an archive of tested and analyzed blood samples. The Committee has included an increase of \$50,000 to continue and expand these activities and encourages CDC to utilize this program to enhance the safety of the blood supply while improving the health of Cooley's anemia patients.

*Craniofacial Malformation.*—The Committee has included an additional \$200,000 over last year's level for CDC's initiatives to help families of children with craniofacial malformations. The Committee commends CDC for their work on this important public health issue. The Committee intends that the increase be used to develop and test a pediatric craniofacial outcomes reporting instrument with the goal of creating an optimum standard of treatment which will improve the level of care for all children nationwide. In addition, the increase may be used to expand and enhance CDC's ongoing studies of children with craniofacial malformations, specifically those relating to ways to decrease secondary surgeries, thus saving healthcare cost and trauma to the child.

*Diamond Blackfan Anemia.*—The Committee has provided sufficient funds to continue CDC's public health outreach and surveillance programs for Diamond Blackfan Anemia [DBA] as included in the budget request.

*Disabilities Prevention.*—The Committee continues to strongly support the CDC disabilities prevention program, which provides support to States and academic centers to reduce the incidence and severity of disabilities, especially developmental and secondary disabilities.

*Down Syndrome.*—The Committee commends the CDC for initiating a study to document the onset and course of secondary and related developmental and mental disorders in individuals with Down syndrome. The Committee encourages further research relating to these areas of dual diagnosis.

*Duchenne and Becker Muscular Dystrophy.*—The Committee has provided a \$100,000 increase within the human development and disability funding to continue surveillance, epidemiological, and education efforts for Duchenne and Becker muscular dystrophy.

*Fetal Alcohol Spectrum Disorders.*—The Committee is concerned by the prevalence of fetal alcohol spectrum disorders [FASD] in the United States and notes that drinking during pregnancy is the Nation's leading known preventable cause of mental retardation and birth defects. To publicize and promote awareness of this critical public health information, the Committee has provided sufficient

resources to continue these activities. The Committee notes that the National Task Force on Fetal Alcohol Syndrome and Fetal Alcohol Effect is due to expire in October 2007. The Committee requests that the CDC submit a progress report within six months on the Task Force's contributions to preventing and reducing fetal alcohol spectrum disorders. The report should outline future plans for the Task Force, including programmatic and funding priorities.

*Folic Acid Campaign.*—The Committee is encouraged with the progress made in preventing neural tube defects, but is concerned by a recent analysis which found that folate concentrations among non-pregnant women of child bearing age decreased by 16 percent from 1999–2000 through 2003–2004. The Committee commends the CDC for its efforts related to educating women about multivitamin usage in order to improve folic acid status and reduce the rate of birth defects. The Committee has provided sufficient funding to continue these efforts, particularly those that engage Hispanic women and other at-risk populations.

*Fragile X.*—Within the increase for human development and disability, the Committee has included an additional \$1,000,000 over last year's level to support the CDC's continuation of public health activities in the areas of Fragile X, Fragile X-associated tremor/ataxia syndrome, and Fragile X-associated premature ovarian failure. The Committee urges the CDC to focus its efforts primarily on increasing epidemiological research, surveillance, and screening efforts, with particular attention towards collecting epidemiological data on the incidence and prevalence of Fragile X and related conditions, including autism. The Committee is aware of the potential benefit of a national registry to track patients living with Fragile X which could be utilized to create a common data entry and management system across research and clinical sites, as well as to track the impact of therapeutic interventions.

The Committee encourages CDC to establish Fragile X surveillance and epidemiology sites throughout the United States based on the Metropolitan Atlanta Developmental Disabilities Study and the Metropolitan Atlanta Developmental Disabilities Surveillance Program. The Committee strongly urges the CDC to leverage Federal funding with private and other public institutions involved in the same work, and to prioritize epidemiological research connecting Fragile X, autism, and autism spectrum disorders.

The Committee requests that CDC report back to the Committee no later than April 2008 with a progress update on the agency's efforts and spending priorities as they relate to Fragile X.

*Healthy Athletes Initiative.*—The Committee has included funding at last year's level for the Healthy Athletes Program, activities requested in the President's budget to provide Special Olympics athletes access to an array of health assessment, education, preventive health services and supplies, and referral for follow-up care where needed. These services are provided to athletes without cost in conjunction with competitions at local, State, national, and international levels.

*Hereditary Hemorrhagic Telangiectasia.*—The Committee is aware of interest in the establishment of a Hereditary Hemorrhagic Telangiectasia [HHT] National Resource Center. The Committee

encourages the CDC to examine carefully proposals to establish such a center.

*Limb Loss Information Center.*—The Committee understands that more than 1.5 million Americans are living with limb loss due to diabetes, heart disease, trauma, and cancer. A key challenge facing individuals with limb loss is gaining access to necessary health and rehabilitative services. The Committee provides funding to continue at no less than fiscal year 2007 levels CDC activities addressing these challenges.

*Paralysis programs.*—The Committee recommendation for human development and disability funding includes an increase of \$500,000 over fiscal year 2007 for activities to increase awareness of paralysis treatments and services, as well as health promotion activities meant to expand access to activity-based rehabilitation.

*Spina Bifida.*—The Committee recognizes that Spina Bifida is the leading permanently disabling birth defect in the United States, and that spina bifida and related neural tube defects are highly preventable. In an effort to continue to prevent spina bifida and improve the quality-of-life for individuals affected by spina bifida, the Committee recommendation for human development and disability increases funding by \$500,000 over the fiscal year 2007 level to provide information and support services. In addition, the Committee supports the memorandum of understanding between CDC and AHRQ to examine clinical treatment of spina bifida and improve quality of life.

*Tourette Syndrome.*—The Committee commends CDC for its support of activities to educate parents, physicians, educators, and other healthcare workers about the disorder and to expand on the scientific knowledge base on prevalence, risk factors and comorbidities of Tourette Syndrome. The Committee has provided \$175,000 over the fiscal year 2007 level for these activities within the increase for the human development and disability category.

*Tuberous Sclerosis Complex.*—Tuberous sclerosis complex [TSC] is a genetic disorder that causes uncontrollable tumor growth. Because this disorder can affect multiple organs of the body, it is difficult to diagnose, track, and properly treat. The Committee has provided resources at the 2007 funding level for CDC to collect and analyze data at the nationwide network of TSC clinics; support surveillance and epidemiological studies; and to educate healthcare professionals and teachers who come into contact with TSC patients.

#### HEALTH INFORMATION AND SERVICE

The Coordinating Center for Health Information and Services includes the National Center for Health Statistics [NCHS], a National Center for Health Marketing, and a National Center for Public Health Informatics.

The Committee recommends a program level of \$232,653,000 for Health Information and Service related activities at the CDC. The fiscal year 2007 comparable program level was \$222,653,000. The budget request for 2008 was \$243,496,000.

### *Health Statistics*

CDC's statistics give context and perspective on which to base important public health decisions. By aggregating the experience of individuals, CDC gains a collective understanding of health, collective experience with the health care system, and public health challenges. NCHS data are used to create a basis for comparisons between population groups or geographic areas, as well as an understanding of how trends in health change and develop over time.

The Committee commends the NCHS for fulfilling its mission as the Nation's premier health statistics agency and for ensuring the credibility and integrity of the data it produces. In particular, the Committee congratulates the agency for its timely release of critical data and encourages it to continue making information, including data from the National Health and Nutrition Examination Survey [NHANES] and the National Health Interview Study [HIS], accessible to the public as soon as possible. The Committee has provided an increase of \$8,000,000 above the fiscal year 2007 level.

*Eating Disorders.*—The Committee is concerned about the growing incidence and health consequences of eating disorders among the population. The extent of the problem, while estimated by several long-term outcome studies as being high, remains unknown. The Committee urges the CDC to research the incidence and morbidity and mortality rates of eating disorders, including anorexia nervosa, bulimia nervosa, binge eating disorder, and eating disorders not otherwise specified across age, race, and sex.

*Food Allergy.*—Life-threatening food allergies severely impair the quality of life for allergic children and their parents, and the incidence of food allergies seems to be increasing. For that reason, the Committee encourages the CDC to include food allergy in its National Health Interview Survey, or a comparable annual tracking mechanism.

*Genomics.*—With the success and continual improvement of genomic technologies, the Committee encourages CDC to consider expanding NHANES to include the genotyping of participants (with appropriate consideration for consent and privacy) and assessing the genomic impact on public health, along with nutrition and environmental factors.

*Nontuberculous Mycobacteria.*—The Committee is concerned that nontuberculous mycobacteria [NTM] incidence continues to rise. Mycobacteria are environmental organisms found in both water and soil that cause significant respiratory damage. The Committee continues to encourage NCHS to include questions regarding NTM testing in ongoing surveys to enhance understanding of the epidemiology of this emergent disease.

*Psoriasis.*—As many as 7.5 million Americans are affected by psoriasis and/or psoriatic arthritis—chronic, inflammatory, painful and disfiguring diseases for which there are limited treatment options and no cure. The Committee understands that there are few efforts to collect epidemiologic and other related data on individuals with psoriasis and psoriatic arthritis, and as such, researchers and clinicians are limited in their longitudinal understanding of the disease and its effects. As such, the Committee strongly encourages the NCHS to add psoriasis and psoriatic arthritis specific components to the 2009–2010 National Health and Nutrition Examina-

tion Survey [NHANES]. Further, the Committee is concerned by reports that there is a dearth of scientists conducting epidemiologic research in dermatology. As such, the Committee encourages the NCHS to work with others within CDC and NIAMS in developing programs to encourage dermatologists to work in the field of epidemiology.

*Vital Statistics.*—The Committee values the National Center for Health Statistics and its critical role in monitoring our Nation's health. The Committee has included sufficient funding to ensure that NCHS collects a full year's worth of data on births, deaths, and other vital information under the agreed upon terms of the Vital Statistics Cooperative Program. In addition, CDC should consider ways to encourage local jurisdictions to implement electronic systems that will improve the timeliness, quality, and security of birth and death data.

#### *Public Health Informatics*

Information systems and information technology are critical to the practice of public health. CDC activities reflect ongoing efforts to build a national network of public health information systems that will enhance public health partner capabilities in detection and monitoring, surveillance, data analysis and interpretation, and other public health activities.

#### *Health Marketing*

CDC links directly with the people whose health it is trying to improve. This activity uses commercial, nonprofit, and public service marketing practices to better understand people's health-related needs and preferences; to motivate changes in behaviors; and to enhance CDC's partnerships with public and private organizations to more effectively accomplish health protection and improvement.

### ENVIRONMENTAL HEALTH AND INJURY PREVENTION

The Coordinating Center for Environmental Health and Injury Prevention includes the National Center for Environmental Health, the Agency for Toxic Substances and Disease Registry, and the National Center for Injury Prevention and Control.

The Committee recommends \$296,338,000 for environmental health and injury prevention related activities at the CDC. The fiscal year 2007 comparable level was \$288,104,000 and the budget request for fiscal year 2008 was \$287,674,000.

#### *Environmental Health*

Many of the public health successes that were achieved in the 20th century can be traced to innovations in environmental health practices. However, emerging pathogens and environmental toxins continue to pose risks to our health and significant challenges to public health. The task of protecting people's health from hazards in their environment requires a broad set of tools. First among these tools are surveillance and data collection to determine which substances in the environment are getting into people and to what degree. It also must be determined whether or not these substances are harmful to humans, and at what level of exposure. The Committee recommendation includes an increase of \$3,317,000 over the

fiscal year 2007 level for environmental health activities. With the exceptions noted below, all activities are funded at the level of the 2007 operating plan.

*Amyotrophic Lateral Sclerosis Registry.*—The Committee is pleased that the CDC is beginning to gather data for a nationwide ALS registry that will estimate the incidence and prevalence of the disease, promote a better understanding of the disease, and provide data that will be useful for research on improving disease management and developing standards of care. The Committee is concerned that ALS is often misdiagnosed as another neurodegenerative disorder. The Committee believes that a more comprehensive registry, focusing on ALS but including other neurodegenerative disorders, will provide a key resource for efforts to understanding the biology and epidemiology of ALS. The Committee has provided an additional \$2,000,000 over the 2007 operating plan to continue and expand the national ALS Registry to other neurodegenerative disorders in line with pending authorization legislation.

*Asthma.*—The Committee is pleased with the work that the CDC has done to address the increasing prevalence of asthma. However, the increase in asthma among children remains alarming. The Committee encourages CDC to continue to expand its outreach aimed at increasing public awareness of asthma control and prevention strategies, particularly among at-risk populations in underserved communities. In addition, the Committee is deeply concerned with the high incidence of asthma among Hawaiian children, and the high prevalence of asthma among Native Hawaiians compared to other adults, including those who are similarly located. The Committee is pleased with the efforts that the CDC has taken to monitor lung function and other asthma interventions among this and other disparately affected populations and encourages the CDC to continue this important research.

*Childhood Lead Poisoning Prevention.*—The Committee continues to commend the CDC for its commitment to support the enhanced development of a portable, hand-held lead screening device that holds great promise for increasing childhood screening rates in underserved communities. Further development of this device will help ensure its application in community health settings.

*Environmental Health Laboratory.*—The CDC environmental health laboratory performs assessments for State investigations of diseases (such as cancer and birth defects) and investigations of chemical exposures, such as dioxin, pesticides, mercury and cadmium. CDC is also working with States to improve public health laboratories that assess State level biomonitoring needs. CDC works closely with academic institutions, other Federal agencies, and other partners to measure human exposure to toxic substances and the adverse effects of that exposure. The Committee has included \$1,000,000 over last year's level for a pilot program for newborn screening for severe combined immunodeficiency disease.

*Health Tracking Network.*—The Committee supports the continued development of a Health Tracking Network, a surveillance system that can integrate environmental hazards data with human exposure and health effects data that have possible links to the environment. With health tracking, public health officials can better

target preventive services, health care providers can offer better health care, and the public will be able to develop a clear understanding of what is occurring in their communities and how overall health can be improved.

*Laboratory Measurement of Trans Fat.*—The Committee is aware that experimental evidence shows an increasing risk of heart disease associated with trans fat intake, and that many State and local governments are proposing bans in restaurants and schools. The Committee encourages the CDC to explore the development of a surveillance system to monitor trans fat levels and other important fatty acids, such as omega-3 fatty acids, in humans.

*Landmine Survivor Network.*—The Committee strongly supports peer support networks for landmine survivors worldwide. The Committee has included \$300,000 over the fiscal year 2007 operating plan level. These funds will be used to expand peer support networks and the number of survivors that are reached in network and non-network countries; strengthen the capacity of medical and rehabilitative care facilities to address the needs of amputees; enhance economic opportunities for survivors; and further CDC programs and research for victims of landmines, civil strife and warfare.

*Nontuberculous Mycobacteria Prevention.*—Mycobacteria are environmental organisms found in both water and soil that can cause significant respiratory damage. The Committee is aware of the increasing incidence of nontuberculous mycobacteria [NTM] pulmonary infections and encourages the CDC to study the environmental issues related to NTM transmission and infection via water and soil, as well as to implement a public health education and outreach initiative to promote NTM education for health care providers and the general public. Further the Committee encourages that CDC develop specific epidemiology studies regarding prevalence, geographic, demographic and host specific data regarding NTM infection in the population.

*Volcanic Emissions.*—The Committee remains concerned about the public health issue of volcanic emissions. Such emissions contribute to the exacerbation of a myriad of pre-existing health conditions in many island residents, especially children. The acute- and long-term impact that these emissions have on both the healthy and pre-disposed residents warrants further study. The Committee has included \$17,000 over the fiscal year 2007 level for research into the health effects of volcanic emissions and encourages the CDC to explore the establishment of a dedicated center that embraces a multi-disciplinary approach in studying the short- and long-term health effects of the volcanic emissions.

#### *Injury Prevention and Control*

CDC is the lead Federal agency for injury prevention and control. Programs are designed to prevent premature death and disability and reduce human suffering and medical costs caused by: fires and burns; poisoning; drowning; violence; lack of bicycle helmet use; lack of seatbelt and proper baby seat use; and other injuries. The national injury control program at CDC encompasses non-occupational injury and applied research in acute care and rehabilitation of the injured. Funds are utilized for both intramural and extra-

mural research as well as assisting State and local health agencies in implementing injury prevention programs. The Committee recognizes the vital role CDC serves as a focal point for all Federal injury control activities.

The Committee has included an increase of \$4,917,000 for injury prevention and control. Within the increase provided, the Committee has provided the following increases over the fiscal year 2007 level: \$1,000,000 for traumatic brain injury; \$1,982,000 for youth violence prevention; and \$1,935,000 for rape prevention. All other activities are funded at the level of the fiscal year 2007 operating plan.

*Child Maltreatment.*—The Committee recognizes that child maltreatment is a serious public health threat with extensive short- and long-term health consequences. New avenues to support child maltreatment prevention would allow CDC to further the identification, enhancement, and dissemination of evidence-based child maltreatment prevention programs, such as positive parenting programs and home visitation programs.

*Falls Prevention.*—The Committee is pleased that the CDC has initiated a falls prevention and safety program to teach older Americans how to prevent falls. The Committee encourages the CDC to engage in an awareness campaign to train health care professionals on the prevention of falls.

*Injury Control Research Centers.*—The Committee recognizes the need for an Injury Control Research Center specializing in children and adolescents. Injury is the leading cause of death and disability among children and teenagers in the United States. Currently, no existing Centers focus exclusively on childhood and adolescent injuries. Therefore, if new Centers are to be added to the program, the Committee encourages CDC to give preference to applicants with proven experience in children and adolescent injury control and prevention research.

*National Violent Death Reporting System.*—The Committee is supportive of the National Violent Death Reporting System, which is a State-based system that collects data from medical examiners, coroners, police, crime labs, and death certificates to understand the circumstances surrounding violent deaths. The information can be used to develop, inform, and evaluate violence prevention programs. The Committee continues to urge the CDC to work with private health and education agencies as well as State agencies in the development and implementation of an injury reporting system.

*Suicide Prevention.*—The Committee encourages CDC to consider supporting the evaluation of suicide prevention planning, programs, and communication efforts to change knowledge and attitudes and to reduce suicide and suicidal behavior. These evaluation efforts would support communities to identify promising and effective suicide prevention strategies that follow the public health model and build community resilience.

*Violence Against Women.*—The Committee urges CDC to increase research on the psychological sequelae of violence against women and expand research on special populations and their risk for violence including adolescents, older women, ethnic minorities, women with disabilities, and other affected populations.

*Youth Violence.*—The Committee has included an increase of \$1,982,000 for CDC's youth violence prevention activities. The Committee notes that the increasing level of youth violence in schools and in cities around the Nation is troubling and urges the CDC to expand efforts to reduce it.

#### OCCUPATIONAL SAFETY AND HEALTH

The Committee recommends \$272,397,000 for occupational safety and health programs. The fiscal year 2007 level was \$254,099,000 and the budget request for fiscal year 2008 was \$252,998,000. The Committee recommendation includes \$92,071,000 in transfers available under section 241 of the Public Health Service Act. Sufficient funding has been provided to maintain staffing levels at the Morgantown facility and increase research funding at that facility.

The CDC's National Institute for Occupational Safety and Health [NIOSH] is the only Federal agency responsible for conducting research and making recommendations for the prevention of work-related illness and injury. The NIOSH mission spans the spectrum of activities necessary for the prevention of work-related illness, injury, disability, and death by gathering information, conducting scientific biomedical research (both applied and basic), and translating the knowledge gained into products and services that impact workers in settings from corporate offices to construction sites to coal mines. With the exceptions noted below, all other activities are funded at the level of the fiscal year 2007 operating plan.

*Education and Research Centers.*—The Committee recognizes the important role Education and Research Centers [ERCs] play in preventive health research and the training of occupational safety and health professionals, and includes an increase of \$1,982,000 over the amount appropriated for ERCs in fiscal year 2007.

*Farm Health and Safety.*—The Committee has included funding to continue the farm health and safety initiative. The Committee encourages NIOSH to give priority to grants to States and private organizations with a focus on disseminating and translating research for occupational safety and health.

*Mine Safety Technology Research.*—The Committee has included \$10,000,000 over the 2007 level for mine safety technology research, development, and testing. The Committee is pleased by the additional research being conducted into mine refuge chambers, emergency tracking, respiratory and communication devices in line with the MINER Act of 2006. The Committee is concerned that the focus on MINER Act deadlines may have inadvertently put other important mine safety research on hold, and expects that additional funding in fiscal year 2008 will be used to ensure that NIOSH's research agenda in areas such as dust monitoring, roof control and disaster prevention are not abandoned. The Committee directs NIOSH to expand the required progress reports on grantmaking and research findings to these related research goals.

The Committee is strongly supportive of the memorandum of understanding NIOSH has worked out with the U.S. Army surrounding communication devices and is eager to see NIOSH expand on this model of collaboration with other Agencies and industries. In particular, the Committee encourages NIOSH to investigate establishing an innovation challenge award similar to those given out

by NASA and the Department of Defense to leverage private resources to tackle difficult technological problems.

*Miners' Choice Health Screening Program.*—The Committee has provided an increase of \$300,000 to further implement the Miners' Choice Health Screening Program in fiscal year 2008. This program was initiated to encourage all miners to obtain free and confidential chest x-rays to obtain more data on the prevalence of Coal Workers' Pneumonconiosis in support of development of new respirable coal dust rules. The Committee is strongly supportive of these efforts and urges NIOSH to work to improve this health screening program, thereby helping to protect the health and safety of our Nation's miners.

*National Occupational Research Agenda.*—NIOSH provides national and international leadership to prevent work-related illness, injury, and death by gathering information, conducting scientific research, and translating the knowledge gained into products and services. The Committee is pleased with the progress NIOSH has made in consulting with partners and stakeholders across the country to examine and update the National Occupational Research Agenda for the coming decade. The Committee expects that this updated agenda will provide an important blueprint for conducting occupational research and examining the impact of stressful workplaces on psychological functioning.

The Committee recommendation includes \$5,000,000 in increased funding for CDC's National Occupational Research Agenda [NORA]. The Committee believes that NORA is a critical scientific research program that protects employees and employers from the high personal and financial costs of worksite health and safety losses. Industries such as agriculture, construction, health care, and mining benefit from the scientific research supported by NORA. The program's research agenda focuses on prevention of disease and injury resulting from infectious diseases, cancer, asthma, hearing loss, musculoskeletal disorders, traumatic injuries, and allergic reactions, among others. The Committee continues to strongly support NORA and encourages expansion of its research program to cover additional causes of workplace health and safety problems.

*National Mesothelioma Registry.*—The Committee has provided an increase of \$100,000 for the continuation and expansion of a National Mesothelioma Registry to collect data regarding symptoms, pathology, evaluation, treatment, outcomes, and quality of life and a Tissue Bank to include the pre- and post-treatment blood (serum and blood cells) specimens as well as tissue specimens from biopsies and surgery.

*National Personal Protective Technologies Laboratory.*—The Committee has provided \$916,000 above the fiscal year 2007 level of funding for the NIOSH National Personal Protective Technologies Laboratory to expedite research and development in, and certification of, protective equipment, such as powered air purifying respirators, and combined self-contained breathing apparatus/escape sets.

*Volcanic Emissions.*—The Committee strongly urges NIOSH to continue to study the impact of potentially toxic volcanic emissions. In particular, preexisting respiratory conditions such as asthma,

chronic bronchitis, and emphysema seem to be particularly susceptible to the effects of sulfur dioxide. The acute and long-term impact that these emissions have on both the healthy and pre-disposed residents warrants further study. The Committee strongly advises a multi-disciplinary approach in studying the short-and long-term health effects of the volcanic emissions.

#### GLOBAL HEALTH

The Committee recommends \$334,038,000 for global health-related activities at the CDC in fiscal year 2008. The fiscal year 2007 comparable level was \$334,038,000 and the budget request for fiscal year 2008 was \$379,719,000. The Office of Global Health leads and coordinates CDC's global programs to promote health and prevent disease in the United States and abroad, including ensuring rapid detection and response to emerging health threats. With the exceptions noted below, all activities are funded at the level of the budget request. The Committee notes that the President's request includes pandemic flu activities that the Committee appropriated in the Public Health and Social Services Emergency Fund through the HHS Office of the Secretary.

*Global HIV/AIDS.*—CDC works with governments in 25 countries in Africa, Asia, and Latin America and the Caribbean focusing on primary prevention of HIV/AIDS; care and treatment of tuberculosis and other opportunistic infections, palliative care and appropriate use of antiretroviral medications; and infrastructure and capacity development.

*Global Disease Detection.*—The Committee commends CDC for its role in strengthening the capacity of the public health community, both at home and abroad, to respond to global threats, such as SARS, monkeypox, West Nile virus, pandemic flu and bioterrorism. CDC's Global Disease Detection System is integral to these efforts. This system is designed to provide worldwide technical support to ensure rapid and accurate diagnoses of emerging infectious disease events, and to provide a secure link between clinicians and laboratories and CDC and the World Health Organization to ensure real-time reporting of emerging threats. The Global Disease Detection System also will support sentinel sites in key regions around the globe to ensure prompt disease detection and referral to a regional laboratory service. These capacities are critical to mitigate the consequences of a catastrophic public health event, whether the cause is an intentional act of terrorism or the natural emergence of a deadly infectious virus, like SARS.

*Global Immunization Activities.*—The Committee includes \$144,438,000 for global immunization activities, including \$101,240,000 for polio vaccine, surveillance, and program operations for the highly successful, yet unfinished polio eradication efforts; and \$43,198,000 for the purchase of measles vaccine for measles mortality reduction and regional measles elimination initiatives and to expand epidemiologic, laboratory, and programmatic/operational support to WHO and its member countries.

*Global Malaria.*—The Committee recognizes that malaria is a global emergency affecting mostly poor women and children. While malaria is treatable and preventable, it remains one of the leading causes of death and disease worldwide. The Committee appreciates

the integral and unique role that the CDC Malaria Program plays in national and global efforts. Insecticide resistance and drug resistance have the potential to compromise global malaria efforts and point to the need for the development and testing of new technologies and materials for insecticide treated nets and new anti-malarial therapies. The Committee is concerned that failure to support these efforts could seriously impair future control efforts. In addition, the Committee supports CDC's role in providing technical assistance to the President's Malaria Initiative, the World Bank, the Global Fund to Fight AIDS, Tuberculosis, and Malaria, and other malaria control initiatives. These programs are in need of greater expertise and capacity in monitoring and evaluation to support documentation of impact of efforts. The Committee recognizes and appreciates that the impact of malaria is not limited to Africa; millions of cases and thousands of deaths occur in Asia and the Americas—areas not currently targeted by the President's Malaria Initiative. Therefore, the Committee intends the CDC Director may have discretion to use some of the funding provided for technical assistance and support program research in non-African malaria-affected countries, which, in turn, can then be used to strengthen control efforts in African countries.

#### TERRORISM

The Committee provides \$1,632,448,000 for CDC terrorism preparedness activities. The comparable fiscal year 2007 level was \$1,541,300,000 and the administration requested \$1,504,375,000 for these activities in fiscal year 2008.

Within the funds provided, \$760,470,000 is for Upgrading State and Local Capacity through grants and cooperative agreements; \$9,500,000 is for anthrax vaccine studies; \$11,095,000 is for quarantine stations; and \$581,335,000 is for the Strategic National Stockpile. All other activities are funded at the fiscal year 2007 operating plan level.

*Centers for Public Health Preparedness.*—The Committee is aware that the Pandemic and All-Hazards Preparedness Act, Public Law 109-417, mandated three central responsibilities for Centers for Public Health Preparedness that include developing core academic curricula based on established competencies, administering a core competency-based training program, and conducting public health systems research. The Committee expects the Secretary and CDC to submit an implementation plan to the Committee prior to making program changes to ensure continuity of competency-based education and training as a public health systems research agenda is developed and added to the program.

*State and Local Capacity.*—The Committee continues to recognize that bioterrorism events will occur at the local level and will require local capacity, preparedness and initial response. It is the Committee's intent that significant funding for State and local public health infrastructure be used to improve local public health capacity and meet the needs determined by local public health agencies. The Committee notes that HHS' cooperative agreement guidance now includes explicit requirements for local concurrence with State spending plans for public health emergency preparedness and urges CDC to monitor and enforce these requirements.

The Committee also recognizes that HHS has incorporated the National Response Plan into the cooperative agreement guidance and established new CDC Preparedness Goals. The Committee therefore urges the Department to assure that any performance metrics intended to measure public health preparedness include measures of local health department performance in the context of their own communities' emergency management systems.

Funds for bioterrorism prevention and response are distributed through grants to 50 States and four metropolitan areas. The Committee strongly recommends that these funds be distributed based on a formula that includes factors for risk of a terrorist event. Risk is challenging to quantify, but the Committee suggests that CDC, in coordination with the Secretary of Health and Human Services, consider the following and other factors: (1) site of headquarters or major offices of multinational organizations; (2) site of major financial markets; (3) site of previous incidents of international terrorism; (4) some measure of population density versus just population; (5) internationally recognized icons; (6) percent of national daily mass transit riders; and (7) proximity to a major port, including major port ranked on number of cargo containers arriving at the port per year.

*Strategic National Stockpile.*—Vaccines and antivirals are not the only supplies that need to be stockpiled in preparation for a pandemic. Currently, most health providers order and stock supplies on a “just-in-time” basis. This means they often only have a few days of reserve supplies, equipment like portable respirators, and commonly prescribed medications, including many basic protective items, such as protective N95 masks, gloves, gowns, and clean hospital linens, many of which are produced abroad and may not be available during a global health emergency.

The Committee commends the Secretary for commissioning the Institute of Medicine to evaluate the potential development of reusable respirator facemasks in the event of an influenza pandemic. The Committee encourages the Secretary to consider comparative data regarding duration of effectiveness, range of tidal activity and shelf life for disposable NIOSH approved respirator facemasks with particulate filter, antimicrobial coated and antimicrobial iodinated technology, and to consider supply needs and issue end-user recommendations for such facemasks.

#### PUBLIC HEALTH RESEARCH

*Public Health Research.*—The Committee has provided \$31,000,000 to fund the Public Health Research program. The fiscal year 2007 comparable level and 2008 budget request were also \$31,000,000. The Committee is strongly supportive of public health and prevention research, which bridges the gap between medical research discoveries and behaviors that people adopt by identifying the best strategies for detecting new diseases, assessing the health status of populations, motivating healthy lifestyles, communicating effective health promotion messages, and acquiring and disseminating information in times of crisis.

## PUBLIC HEALTH IMPROVEMENT AND LEADERSHIP

The Committee provides \$209,829,000 for public health improvement and leadership activities at the CDC. The fiscal year 2007 comparable level was \$189,808,000 and the budget request for fiscal year 2008 was \$190,412,000.

*Leadership and Management*

The Committee provides \$162,879,000 for leadership and management costs at the CDC in fiscal year 2008. The fiscal year 2007 comparable level was \$162,214,000 and the budget request for fiscal year 2008 was \$162,879,000.

In addition, the Committee has included sufficient funding for the following projects in the following amounts for fiscal year 2008:

Project	Committee recommendation	Requested by
A Voice for All, Wilmington, DE, for speech and language evaluations for persons with disabilities.	\$400,000	Harkin
Alaska Department of Health and Social Services, Juneau, AK, for an Obesity Prevention and Control project in Alaska.	500,000	Stevens
Alaska Department of Health and Social Services, Juneau, AK, for continuation and expansion of program to detect and control tuberculosis in Alaska.	500,000	Stevens
Alaska Multiple Sclerosis Center, Anchorage, AK, for multiple sclerosis related activities.	150,000	Stevens
Albert Einstein Healthcare Network, Philadelphia, PA, for college student screening programs.	200,000	Specter
American Optometric Association, Alexandria, VA, for the InfantSee program ....	500,000	Byrd
Brown County Oral Health Partnership, Green Bay, WI, to expand an oral health program.	300,000	Kohl
Camden County, Camden, NJ, to purchase, equip and staff a mobile health van.	400,000	Lautenberg, Menendez
Cascade AIDS, Portland, Oregon, to conduct HIV/AIDS awareness and prevention programs.	200,000	Smith
Center for International Rehabilitation, Chicago, IL, for the Disability Rights Monitor.	250,000	Harkin
Colorado School of Mines, Golden, CO, for the development and deployment of Mine safety and Rescue through Sensing Networks and Robotics Technology (Mine-SENTRY).	200,000	Allard, Salazar
Community Health Centers in Hawaii for Childhood Rural Asthma Project, for childhood rural asthma project.	175,000	Inouye
Emory University, Atlanta, GA, for the Southeastern Center for Emerging Biologic Threats.	300,000	Chambliss, Isakson
ExemplaSaint Joseph Hospital Foundation, Denver, CO, for the mobile mammography program.	100,000	Salazar
Fletcher Allen Health Care, Burlington, VT, to develop chronic disease registries.	200,000	Leahy
Food Allergy and Anaphylaxis Network, Fairfax, VA, for the Iowa Food Allergy Education program.	120,000	Harkin
Georgia Rural Water Association, Barnesville, GA, for the National Fluoridation Training Institute.	100,000	Chambliss
Health Care Medical Technology, Inc., Sioux Falls, SD, for comprehensive health education.	100,000	Johnson
Health Care Network, Inc, Racine, WI, to coordinate dental services for low-income patients.	100,000	Kohl
Healthy Futures, Columbia, SC, to educate the community to recognize the health concerns, specifically obesity, of youth in the minority community.	250,000	Graham
Healthy Northeast Pennsylvania Initiative, Clarks Summit, PA, for health education.	100,000	Specter
Henderson, Henderson, NV, for a diabetes screening, education and counseling program for seniors.	200,000	Reid
Institute of Medical Humanism, Inc, Bennington, VT, for an end-of-life care initiative.	200,000	Leahy

Project	Committee recommendation	Requested by
Iowa Chronic Care Consortium, Des Moines, Iowa, for a preventative health demonstration program.	150,000	Harkin, Grassley
Iowa Department of Public Health to continue the Harkin Wellness Grant program.	2,000,000	Harkin
Iowa Games, Ames, IA, to continue the Lighten Up Iowa program .....	100,000	Harkin
Iowa Health Foundation, for wellness activities for dementia patients .....	100,000	Harkin
Iowa State University, Ames, IA, for the Iowa Initiative for Healthier Schools and Student Wellness.	450,000	Harkin, Grassley
Kennedy Health System, Voorhees, NJ, for the Women and Children's Health Pavilion's Advanced Cancer Prevention and Treatment Initiative.	450,000	Lautenberg, Menendez
Kids Kicking Cancer, Inc., Lansing, MI, for cancer treatment support activities.	700,000	Levin, Stabenow
Lower Bucks Hospital, Bristol, PA, for autism therapy evaluation .....	100,000	Specter
Marin County, San Rafael, CA, for breast cancer screening and epidemiology ...	150,000	Boxer
Mary Bird Perkins Cancer Center, Baton Rouge, LA, for additional C.A.R.E Network screenings and program development.	100,000	Vitter
Michigan Health and Hospital Association, Kalamazoo, MI, to improve quality of care and patient safety in hospital surgery settings.	500,000	Levin, Stabenow
Nazareth Hospital, Philadelphia, PA, for health outreach .....	100,000	Specter
Northeast Regional Cancer Institute, Scranton, PA, for cancer screening evaluation.	100,000	Specter
Nueva Esperanza, Philadelphia, PA, for HIV/AIDS programs .....	100,000	Specter
Pennsylvania Breast Cancer Coalition, Ephrata, PA, for education, awareness, and publication production.	100,000	Specter, Casey
Pittsburgh Regional Health Initiative, Pittsburgh, PA, for an infection control training program.	100,000	Specter
Potter County Human Services, Roulette, PA, for health promotion programs .....	100,000	Specter
Providence Multiple Sclerosis Center, Portland, Oregon, to develop a registry for multiple sclerosis.	100,000	Smith, Wyden
Saint Michael's Medical Center, Newark, NJ, for heart disease screening .....	200,000	Menendez, Lautenberg
Sister to Sister-Everyone Has a Heart Foundation to increase women's awareness of heart disease, Washington, D.C.	250,000	Cardin
South Dakota State University, Brookings, SD, for interdisciplinary research on obesity prevention and treatment.	125,000	Johnson, Thune
Spinal Muscular Atrophy Foundation, New York, NY, for outreach, patient education and registries.	500,000	Schumer, Clinton, Harkin, Specter
Supporting Autism Families Everywhere, Wilkes-Barre, PA, for Autism programs and education.	100,000	Specter
Texas Tech University Health Sciences Center at El Paso, El Paso, TX, for the Center for Research and Re-Emerging Infectious Diseases.	500,000	Hutchison
United Mine Workers of America, Fairfax, VA, for a fuel-cell coalmine vehicle demonstration project.	100,000	Specter
University of Colorado School of Dentistry, Aurora, CO, for a rural oral health care program.	200,000	Johnson
University of Kansas, Lawrence, KS, for the biodiversity research center .....	1,400,000	Roberts
University of Montana Rehabilitation, Research, and Training Center, Missoula, MT, to develop program Living Well and Working Well with a Disability: Improving Health, Promoting Employment, and Reducing Medical Costs.	150,000	Baucus
University of Montana, Missoula, MT, for Methamphetamine Detection and Health Effects Research.	180,000	Tester
University of North Carolina at Chapel Hill with East Carolina University, Chapel Hill, North Carolina, for the Program in Racial Disparities in Cardiovascular Disease.	700,000	Dole
University of North Texas, Denton, TX, for the Center for Computational Epidemiology.	400,000	Hutchison
University of Pittsburgh Medical Center, Pittsburgh, PA, for health outreach .....	200,000	Specter
University of Wisconsin Milwaukee, Milwaukee, WI, for evidence based adolescent pregnancy prevention programs.	240,000	Kohl
WellSpan Health, York, PA, for health outreach .....	100,000	Specter
Youth and Family Services, Rapid City, SD, for the Health Connections Program.	300,000	Johnson, Thune

*Applied Epidemiology Fellowship Training.*—The Committee has included \$2,000,000 for the Applied Epidemiology Fellowship

Training program to address the documented shortages of these core public health professionals in State and local health departments.

*Director's Discretionary Fund.*—The Committee has provided \$7,851,000 for a Director's Discretionary Fund. This fund will allow the director to quickly respond to emerging public health issues and threats not contemplated at the time of enactment of the appropriations.

*Epidemic Services and Response.*—CDC's epidemic services and response program provides resources and scientific expertise for operating and evaluating surveillance systems; developing and refining research methods and strategies to the benefit of public health practice; training public health professionals who are prepared to respond to public health emergencies, outbreaks and other assistance requests; and communicating with multi-faceted audiences accurate public health information and effective messages. The Committee recognizes that CDC maintains a keen appreciation for the fact that local outbreaks of illness can develop rapidly into epidemics; that previously unidentified health problems can appear at any time; that contaminated food or defective products may appear in the community without warning; and that the threat of bioterrorism is present in many areas of the world. When CDC participates in an investigation, all of the resources of the agency are at the disposal of the affected area, including its state-of-the-art laboratories.

*Leadership and Management Savings.*—The Committee strongly believes that as large a portion as possible of CDC funding should go to programs and initiatives that improve the health and safety of Americans. To facilitate this goal, any savings in leadership and management may be reallocated to the Director's Discretionary Fund upon notification of the Committee.

#### PREVENTIVE HEALTH AND HEALTH SERVICES BLOCK GRANT

The Committee has provided \$99,000,000 for the Preventive Health and Health Services Block grant. The fiscal year 2007 comparable level was \$99,000,000 and the budget request for fiscal year 2008 did not request any funding for this program.

The block grant provides funding for primary prevention activities and health services that address urgent health problems in local communities. This flexible source of funding can be used to target concerns where other funds do not exist or where they are inadequate to address the extent of the health problem. The grants are made to the 50 States, the District of Columbia, two American Indian tribes, and eight U.S. territories.

#### BUILDINGS AND FACILITIES

The Committee has provided \$220,000,000 for the planning, design, and construction of new facilities, repair and renovation of existing CDC facilities, and data security and storage. The fiscal year 2007 comparable level was \$134,400,000 and the budget request for fiscal year 2008 was \$20,000,000.

The Committee has again provided bill language to allow CDC to enter into a single contract or related contracts for the full scope of development and construction of facilities and instructs CDC to

utilize this authority, when necessary, in constructing the Atlanta and Fort Collins facilities.

#### BUSINESS SERVICES AND SUPPORT

The Committee provides \$344,377,000 for business services support functions at the CDC. The fiscal year 2007 comparable level was \$344,377,000 and the administration requested a comparable level of \$319,877,000 for fiscal year 2008. These funds will be used to support CDC-wide support functions.

The Committee strongly believes that as large a portion as possible of CDC funding should go to programs and initiatives that improve the health and safety of Americans. To facilitate this goal, any savings in business services support may be reallocated to the Director's Discretionary Fund upon notification of the Committee.

#### NATIONAL INSTITUTES OF HEALTH

When the 5-year effort to double funding for the National Institutes of Health ended in fiscal year 2003, few could have imagined that the agency would be in the position it finds itself today. After 4 years of stagnant budgets, its funding has dropped 8.3 percent in real terms. The overall success rate for research project grants stands at just 21 percent. Young investigators have only the slimmest chance of getting approved on their first try, and even some well-established biomedical researchers are leaving the field.

The impact of this funding squeeze goes far beyond those directly involved in awarding and receiving grants. More importantly, it threatens the pace of biomedical research and could delay cures and treatments that are within reach. And the ripple effect could be felt for decades to come if, as feared, we lose the next generation of scientists to other careers.

The Committee took steps to reverse this trend in the fiscal year 2007 joint funding resolution, which increased NIH funding by \$570,000,000—enough to launch the National Children's Study, add another 500 research grants, and provide additional funding for high-risk grants and young investigators.

Regrettably, the budget request calls for cutting NIH funding by \$278,646,000, for a total of \$28,621,241,000. The Committee recommendation rejects that cut and instead provides a \$1,000,000,000 increase over the fiscal year 2007 appropriation, for a total of \$29,899,887,000. This amount will allow the NIH, for the first time since fiscal year 2005, to plan on increasing the average costs of new grants (by 3 percent) and provide the full "committed level" for noncompeting grants.

The recommendation provides \$110,900,000 for the second full year of implementing the National Children's Study. The fiscal year 2007 appropriation was \$69,000,000. The Committee also fully funds the budget request of \$300,000,000 for transfer to the Global Fund to Fight AIDS, Tuberculosis and Malaria. The fiscal year 2007 transfer was \$99,000,000.

The recommendation also includes \$96,130,000 for radiological, nuclear and chemical countermeasures, and \$91,250,000 for Director's 1-year Bridge awards.

The Committee recommends \$531,300,000 for the Common Fund. This is a 10 percent increase over the fiscal year 2007 appropriation of \$483,000,000. The budget request is \$486,153,000. Within the fund, the Committee recommends \$28,459,000 for Director's Pioneer Awards, \$55,000,000 for Director's New Innovator Awards and up to \$25,000,000 that can be awarded using a flexible research authority described in a general provision in the bill.

The Committee strongly endorses the goals of the Common Fund, as articulated in the National Institutes of Health Reform Act of 2006. In recognition of the growing importance of this funding mechanism, and in an effort to provide greater transparency, the Committee instituted two changes in the fiscal year 2007 joint funding resolution. First, it specified the exact amount appropriated for the Common Fund in bill language. Second, it ended the practice of transferring a certain percentage of each Institute and Center's appropriation to the fund.

This report marks another related change. The Committee will now display the Common Fund level on the funding table at the back of the report, within the Office of the Director.

These changes present a challenge in comparing the President's fiscal year 2008 budget request (which was prepared before the completion of the fiscal 2007 joint funding resolution) with the fiscal year 2007 appropriated level and with the fiscal year 2008 Committee recommendation on the funding table. Under the "budget estimate" column, the funding level for each Institute and Center includes a 1.3 percent contribution to the Common Fund, in addition to the base amount for each IC. For the fiscal year 2007 appropriated level and the fiscal year 2008 Committee recommendation, the Institute and Center amounts do not include any Common Fund contributions—just the base amount for each IC—while the total Common Fund amount is shown on its own line within the Office of the Director.

As a result, the "budget estimate" for each IC reflects an amount that is higher relative to the other two columns, while the "budget estimate" for the Common Fund is lower relative to the other columns. In future years, all the columns will be consistent.

The Committee includes a new general provision in the bill that transfers funds to HRSA and AHRQ, to be used for National Research Service Awards.

*Budget Justification Materials.*—The Committee commends the NIH for making significant improvements to its budget justification materials, in response to last year's report language. The Committee reiterates its desire for the justifications to include a funding table for stem cell research. The table should include amounts for human and non-human research involving embryonic and non-embryonic stem cells, from fiscal years 2004 through 2009.

The Committee also expects the justifications to include the funding level necessary to implement the public access policy described below.

*Public Access.*—The Committee has included bill language that would require investigators who are funded by the NIH to submit an electronic version of their final peer-reviewed manuscripts to the National Library of Medicine's PubMed Central upon acceptance for publication. The manuscript shall be made publicly avail-

able on PubMed Central as soon as possible, but no later than 12 months after the official date of publication. The Committee highly encourages collaborations with journal publishers that would enable them to deposit manuscripts on behalf of the funded investigators, if all parties agree. The Committee directs the NIH to seek and carefully take into account the advice of journal publishers on the implementation of this policy.

In particular, the Committee directs the NIH to ensure that publishers' copyright protections are maintained. The Committee also directs the NIH to provide a report by April 1, 2008, on the status of the program, including how many manuscripts have been made publicly available through PubMed Central and how many have been deposited but not yet made publicly available. The report should also break down the amounts by the various submission methods, including author deposit, bulk deposit and the NIH portfolio.

*Stem Cell Research.*—The Committee includes legislative language (sec. 520) that would supersede the administration's guidelines on human embryonic stem cell research, which stipulate that only those stem cell lines derived by August 9, 2001, are eligible for NIH-funded research. Only 21 lines meet those criteria, fewer than 10 of which are commonly used by researchers—not nearly enough to reflect the diversity of the human population. Furthermore, all 21 are contaminated with mouse feeder cells, and many are showing abnormalities.

The bill language sets a new cut-off date of June 15, 2007, and institutes new ethical guidelines that are lifted from S. 5, the Stem Cell Research Enhancement Act of 2007, and are tighter than those under the administration's policy. The new provision is not a replacement for S. 5, which would allow NIH-funded research on any stem cell line regardless of the date on which it was derived. However, it would create exciting new potential for treatments and cures by greatly expanding the number of eligible lines.

Until this provision is implemented, the Committee strongly urges the NIH to support human embryonic stem cell research to the greatest extent possible under the current guidelines. The Committee also expects the NIH to explore all other avenues of stem cell research, including adult stem cells and stem cells from the placenta, amniotic fluid, cord blood and other sources; and alternative methods of establishing pluripotent stem cell lines that do not involve the destruction of an embryo.

NATIONAL CANCER INSTITUTE

Appropriations, 2007 .....	\$4,797,639,000
Budget estimate, 2008 .....	4,782,114,000
Committee recommendation .....	4,910,160,000

The Committee recommends an appropriation of \$4,910,160,000 for the National Cancer Institute [NCI]. The budget request was \$4,782,114,000. The fiscal year 2007 appropriation was \$4,797,639,000. The comparable amounts for the budget estimate include funds to be transferred from the Office of AIDS Research.

As explained in the opening section on the NIH, the budget request includes a contribution to the Common Fund equal to 1.3

percent of the Institute's budget. The other amounts above do not include any contribution for the Common Fund.

*Blood Cancers.*—The incidence of lymphoma, multiple myeloma and acute leukemia/myelodysplasia increases dramatically with age, and chronic lymphocytic leukemia [CLL] is almost exclusively a disease of the aged. The Committee urges the NCI to place greater emphasis on translational and clinical research in blood cancers, with particular attention to blood cancers that affect the elderly.

*Brain Tumors.*—The Committee strongly encourages the NCI to continue its support for clinical research consortia and SPORes that focus on brain tumors.

*Breast Cancer.*—The Committee again strongly urges the NCI to give increased attention to breast cancer, particularly in the areas of lymphedema, stress, nutrition, exercise, weight, the environment, and ways to help women more fully restore and improve their quality of life after treatment. The Committee also urges the NCI to further accelerate advances in breast cancer screening technology and to capitalize on existing and create new technologies that improve early diagnosis, health outcomes, and survival.

*Cancer Clinical Trials.*—Only 3 percent of adult cancer patients participate in trials, and the participation by senior citizens is even more limited. The Committee urges the NCI to support research to investigate decision-making by patients, particularly with respect to barriers to, and decisions on, participation in clinical trials. This research effort should be undertaken to inform strategies to enhance accrual in cancer clinical trials. Current low levels of accrual are often rate-limiting in the development of novel treatment approaches, and solving this problem would ultimately improve outcomes for cancer patients.

*Cancer Genome.*—The Committee commends the NHGRI and NCI for launching The Cancer Genome Atlas [TCGA], which will accelerate the understanding of the molecular basis of cancer using genome analysis technologies, including large-scale genome sequencing, copy number variation, and expression analysis.

*Cancer in Minority Communities.*—The Committee commends the NCI for its continuing efforts to establish a cancer center at a minority institution focused on research, treatment, and prevention of cancer in African American and other minority communities.

*Cancer in Native Hawaiians.*—The Committee continues to be deeply concerned that mortality rates for all cancers are much higher for Native Hawaiian males and females compared to other residents of the State. The Committee strongly urges the NCI to increase research that is focused towards understanding cancer among Native Hawaiians.

*Cancer Metastasis to Bone.*—A frequent complication of cancer is its spread to bone. The Committee understands that immune response plays a role in cancer metastasis and urges the NCI to focus research in the emerging area of osteoimmunology. The Committee encourages the NCI, NIAMS, NIA, and NIDDK to support research to determine mechanisms to identify, block and treat cancer metastasis to bone. Furthermore, the Committee urges the NCI to expand research on osteosarcoma to improve survival and quality of life and to prevent metastatic osteosarcoma in children and teenagers who develop this cancer. In addition, the NCI is encouraged

to expand research on tumor dormancy as it relates to bone metastasis.

*Communication Research.*—The Committee is pleased to note that the NCI has a long history of supporting research on behavioral and sociocultural influences on cancer outcomes and access to care, including support for communication research to ensure that the public receives accurate, easily understood information about the human papillomavirus vaccine, and thus facilitate access for those who need appropriate care.

*Gynecologic Oncology Clinical Trials Cooperative Group.*—The Committee urges the NCI to provide additional resources to fund clinical trials through the Gynecologic Oncology Clinical Trials Cooperative Group. Priority should be given to translational research involving biologic prognosticators and therapeutic effects of chemotherapy to speed the development and delivery of new cancer treatments to women with gynecologic cancers.

*HPV Vaccine and Cervical Cancer.*—The Committee urges the NCI to fund research that will allow for the identification of the most cost-effective management strategy for cervical cancer screening in the era of HPV L1 vaccines and to identify the circumstances where Pap test/HPV screening fails in vaccinated women.

*Imaging Systems Technologies.*—The Committee is aware of the potential for improved patient care and disease management represented by molecular imaging technologies, especially positron emission tomography [PET], through its ability to image the biology of many kinds of cancer and other diseases. The Committee continues to support the NCI's increased emphasis on examining the molecular basis of disease through imaging technologies such as PET and MicroPET. The Committee further encourages the testing of women for breast cancer and men for prostate cancer to demonstrate and quantify the increased diagnostic and staging capabilities of PET relative to conventional diagnostic and staging technologies, including mammography.

*Liver Cancer.*—The Committee notes that the incidence of primary liver cancer continues to increase, liver cancer is the only cancer experiencing continuing increases in mortality, and treatment options for physicians remain very limited. Therefore, the Committee urges the NCI to work closely with the NIDDK to develop a basic, clinical and translational research program designed to reverse these trends and enhance survivability. In addition, the Committee welcomes the conclusions of the October 2006 NCI-Hepatitis B Foundation workshop regarding the early detection of liver cancer, and it urges the NCI to support more work in this area.

*Lung Cancer.*—Lung cancer is the leading cause of cancer death among women and minority populations. The Committee encourages the NCI to work with the thoracic surgical community to initiate new clinical trials that involve patients at an early stage of the disease when surgery is a treatment option.

*Lymphatic Research and Lymphatic Diseases.*—The Committee urges the NCI to support research on lymphedema and to devote increased resources toward the study of lymphangiogenesis and lymphatic imaging.

*Lymphoma Translational and Clinical Research.*—The Committee urges the NCI to capitalize on the recent investment in

basic research on lymphoma by aggressively funding translational and clinical research on this disease. The basic research program has resulted in significant information about the biology of lymphoma and better strategies for identifying critical metabolic pathways and immune system functioning in lymphoma. The translational and clinical research effort should be strengthened to accelerate therapeutic development for lymphoma.

*Melanoma.*—The Committee commends the NCI for a workshop in February 2007 to develop a Strategic Action Plan for Melanoma Research. The Committee strongly encourages the NCI to devote sufficient funds in the areas of research opportunity identified by the plan and issue program announcements in those areas. The Committee requests the NCI to report by July 1, 2008, on steps it has taken to implement the plan. In addition, the Committee encourages the NCI to support the creation of a Melanoma Investigators Consortium, and to fund a multi-site, multi-year, population-based clinical trial to test the efficacy of early detection methods. The Committee also recommends increased collaboration between the NCI and the NIAMS on their melanoma research activities.

*Mesothelioma Research.*—The Committee is concerned with the pace of mesothelioma research. The NCI is encouraged to establish up to 10 mesothelioma centers and increase related research, including clinical trials, detection and prevention methods, palliation of disease symptoms and pain management.

*Nanosystems Biology.*—The Committee encourages the NCI and the Office of the Director to continue to support a collaborative effort to bring nanotechnology, systems biology and molecular imaging together to examine the molecular basis of cancer. Many clinical trials of new drugs are now considered to fail if only 10 percent of patients benefit, yet the 10 percent may represent a specific type of the disease for which the drug may be 100 percent effective. Bringing these three disciplines together may allow researchers to identify specific sub-types of cancer and to better target new interventions. Successful results of such an effort could lead to a molecular classification of many types of cancer and to targeted molecular treatments for molecular-specific diseases.

*Neurofibromatosis [NF].*—Recognizing NF's connection to many of the most common forms of human cancer, the Committee encourages the NCI to substantially increase its NF research portfolio in such areas as further development of animal models, natural history studies, genetic and drug screening, therapeutic experimentation, and clinical and pre-clinical and clinical trials. The Committee also encourages the NCI to create, fund, and implement NF clinical and pre-clinical trials infrastructures including NF centers, pre-clinical mouse consortiums, patient data bases, and tissue banks. The Committee further encourages the NCI to apply existing cancer drugs to NF patients in clinical trials both extramurally and intramurally, and to develop new drugs for NF which could then apply to the general population.

*Non-Hodgkin Lymphoma.*—The incidence rates for non-Hodgkin lymphoma in the general population have doubled since the 1970s, for reasons that are not clear. The Committee strongly recommends an enhanced commitment to research focusing on the possible environmental links to lymphoma. The Committee suggests that the

NCI direct funds to: (1) studies on the identification of environmental-genetic interactions that may influence the development of lymphoma; (2) studies of adequate scope to assure the identification of environmental risk factors for specific subtypes of lymphoma; (3) small studies designed to improve detection and quantification of historically difficult-to-measure environmental factors; (4) studies that are directed toward enhancing the understanding of the role of the immune system in the initiation and progression of lymphoma; and, (5) studies that examine the simultaneous presence of a wide profile of infectious agents among individuals with lymphoma. The Committee also notes that lymphoma is often diagnosed in young adulthood and middle age, and survivors may experience immediate, and also late and long-term effects of the disease and treatment. The Committee urges the NCI to dedicate some of its survivorship research funds on research issues related to problems confronted by lymphoma survivors.

*Ovarian Cancer.*—The Committee urges the NCI to support randomized, prospective studies that would lead to the validation and acceptance of biomarkers for the early detection of ovarian cancer.

*Pancreatic Cancer.*—Research on pancreatic cancer, the country’s fourth leading cause of cancer death among men and women, remains underfunded as compared to the top five cancers based on mortality. The Committee notes that the NCI currently categorizes grants as falling under a specific cancer type if the grant is at least 25 percent relevant to that cancer. The Committee urges the NCI to increase this criterion to 50 percent relevancy for pancreatic cancer research and to fund more pancreatic cancer grants at this higher level so that the minimal dollars being funded toward the disease are truly pushing the research forward. Further, the Committee requests that the Institute ensure that pancreatic cancer grants are reviewed by at least three reviewers who are experts in pancreatic cancer research. Finally, the Committee is disappointed that the three existing pancreatic cancer Specialized Projects of Research Excellence [SPORE] grants have never been fully funded, and it urges the Institute to fully fund no fewer than three pancreatic cancer SPORes this year.

*Prostate Cancer.*—The Committee commends the NCI for its considerable investment in prostate cancer and encourages the Institute to continue to support research to improve the accuracy of screening and early detection of this disease.

*Tuberous Sclerosis Complex [TSC].*—The Committee applauds the NCI for supporting a multi-center clinical trial on TSC, and it urges the Institute to support additional clinical trials. The Committee also encourages the NCI to continue to support basic research on the mTOR signaling pathway and the role of the TSC1/2 genes in nutrient sensing, insulin signaling and cell growth and proliferation.

NATIONAL HEART, LUNG, AND BLOOD INSTITUTE

Appropriations, 2007 .....	\$2,922,929,000
Budget estimate, 2008 .....	2,925,413,000
Committee recommendation .....	2,992,197,000

The Committee recommendation includes \$2,992,197,000 for the National Heart, Lung, and Blood Institute [NHLBI]. The fiscal year

2007 appropriation was \$2,922,929,000 and the budget request was \$2,925,413,000. The comparable amounts for the budget estimate include funds to be transferred from the Office of AIDS Research.

As explained in the opening section on the NIH, the budget request includes a contribution to the Common Fund equal to 1.3 percent of the Institute's budget. The other amounts above do not include any contribution for the Common Fund.

*ACCORD Trial.*—The Committee commends the NHLBI on the ACCORD trial, which should definitively address the relationship between glucose levels, blood pressure and lipids in the formation of macrovascular disease. The NHLBI is urged to consider utilization of new therapeutic options, particularly continuous glucose sensors, to assist those patients in the study for whom current treatments are not allowing target glycemic control levels to be achieved.

*Advanced Imaging Technology.*—The Committee is aware that heart perfusion PET scans using Rubidium-82 are considered the “gold standard” for determining the extent of muscle damage to the heart following a heart attack. The Committee encourages the NHLBI to expand its research efforts into the role of biological imaging and PET in delivering more accurate information to determine appropriate treatment for heart disease patients.

*Bleeding and Clotting Disorders.*—The Committee commends the NHLBI for its commitment to research in bleeding and clotting disorders and encourages the Institute to continue these efforts focusing on improved and novel therapies for these disorders and maintaining its collaborative relationship with patient-advocacy groups and the scientific and medical research community.

*Bone Marrow Failure Diseases.*—The Committee applauds the NHLBI for funding research that has led to a greater understanding of bone marrow failure diseases. The Committee encourages the NHLBI to collaborate with the NCI to fund new research efforts that seek new treatments and cures for aplastic anemia, myelodysplastic syndromes and paroxysmal nocturnal hemoglobinuria.

*Cardiovascular Diseases.*—The Committee commends the Institute for its leadership in undertaking an inclusive strategic planning process, which included a national conference on heart disease that was recommended by this Committee in fiscal year 2006. The Committee continues to regard research on heart disease, stroke and other cardiovascular diseases as a top health priority, and it expects the Institute to aggressively expand its investment in basic, clinical, translational, and trans-institute research through all available mechanisms.

*Chronic Obstruction Pulmonary Disease [COPD].*—The Committee commends the NHLBI for launching a national public awareness campaign designed to increase awareness, diagnoses, and treatment for COPD. The Committee is aware that the Division of Lung Diseases has sponsored several COPD workshops that have recommended additional research focused on the disease process, pathogenesis, and therapy and other recommendations. The Committee recommends that the NHLBI aggressively pursue COPD research as recommended by these expert panels and convene a panel of leading researchers to create a COPD Research Ac-

tion Plan to identify opportunities and to accelerate the pace of research.

*Congenital Heart Disease.*—The Committee commends the NHLBI for convening a working group to address congenital heart diseases, and supports its recommendation that action be taken to prevent needless disability and premature mortality. The Committee urges the NHLBI to work with patient associations, other appropriate NIH Institutes, and the CDC to develop education and research initiatives targeted to the life-long needs of congenital heart defect survivors.

*Cooley's Anemia [Thalassemia].*—The Committee remains supportive of the effort being undertaken by the Thalassemia Clinical Research Network. In addition, the Committee commends the NHLBI for its commitment to pursue gene therapy and urges the Institute to move more aggressively in pursuing a research agenda that will lead to a cure.

*Depression and Heart Disease.*—The NHLBI is encouraged to work closely with the NIMH to ensure that projects examining depression in heart disease patients, or how treatment of depression may improve adherence to cardiovascular health regimens, are routed to the appropriate Institute and review groups so that this type of research may be supported.

*Diabetic Cardiovascular Disease.*—Research has shown that heart disease begins as early as childhood or adolescence in type 1 diabetes patients. The NHLBI is encouraged to promote research to identify early biomarkers of cardiovascular disease in young diabetic patients to learn who might benefit from therapeutic agents that are currently used in adults.

*Diamond-Blackfan Anemia [DBA].*—The Committee is pleased with the NHLBI's support of research initiatives investigating DBA and the enhancement of the DBA Registry. The Committee understands that important advancements have been achieved in the areas of further gene discovery and the indication that DBA is the first human disorder linked to a ribosome protein deficiency. Understanding that breakthroughs in this disorder may lead to important strides in additional research areas relating to blood cell formation (recovery from cancer chemotherapy), cancer predisposition, gene discovery, and the effectiveness of steroids and blood transfusions as treatment options for all bone marrow failure syndromes, the Committee continues to commend the NHLBI for its attention to this important disorder.

*Heart Disease in Native Hawaiians.*—The Committee continues to be concerned that Native Hawaiians have a higher rate of mortality from heart disease and cerebrovascular disease compared to other residents of the State. The Committee strongly urges the NHLBI to increase research that is focused towards understanding heart disease and cerebrovascular disease among Native Hawaiians.

*Hematology.*—The Committee commends the NHLBI for developing a strategic plan based on input from its broad constituency and for committing 70 percent of its budget to the funding of investigator-initiated research. The Committee encourages the NHLBI, in conjunction with the NIDDK, NCI and NIA and experts in hematology research, to identify hematology research priorities that

can impact chronic malignant and non-malignant bleeding disorders.

*Kidney Disease.*—The Committee notes that chronic kidney dysfunction is a unique and important risk factor for the development of cardiovascular disease. Additionally, hypertension, or high blood pressure, is the second-leading cause of end-stage renal disease [ESRD]. Given the significant morbidity and mortality associated with cardiovascular disease among patients with kidney disease, the Committee recognizes the importance of the urgency to examine the relationship between cardiovascular disease and kidney disease. The Committee encourages the NHLBI and NIDDK to work together to develop appropriate basic and clinical research initiatives addressing the pathogenesis of cardiovascular events in patients with kidney disease and exploring therapeutic and preventive interventions. The Committee also encourages the NHLBI to work with the renal community to support ongoing educational programs directed to health professionals, patients and the public to raise the awareness of the relationship between cardiovascular disease, hypertension and kidney disease.

*Lupus.*—The Committee strongly encourages the NHLBI to expand and intensify research on lupus, with a special focus on its links to early-onset cardiovascular disease.

*Lymphatic Research and Lymphatic Diseases.*—The Committee commends the NHLBI for its leadership role in lymphatic research and strongly encourages amplified continuation of these efforts in concert with the NCI, NIAID, NIDDK, NIAMS, and other relevant ICs. In addition, the Committee urges the NHLBI's Lung Division to engage in lymphatic research initiatives, with particular attention to congenital lymphatic malformation-induced pulmonary dysfunction.

*Marfan Syndrome.*—The Committee commends the NHLBI for its strong leadership on Marfan syndrome research, particularly its sponsorship of a landmark “Pediatric Heart Network” clinical trial focused on the drug losartan. The Committee encourages the NHLBI to continue to partner with the Marfan syndrome community and explore ways to support promising ancillary studies to the clinical trial. The Committee also applauds the Institute for establishing a Working Group on Marfan Syndrome.

*Neurofibromatosis [NF].*—The Committee applauds the NHLBI for its involvement with NF research and with NF patient advocacy groups, and it encourages the Institute to continue to expand its NF research portfolio.

*Nontuberculous Mycobacteria [NTM].*—The Committee commends the NIH for its planning meetings regarding NTM and recommends further collaboration with the NIAID, the advocacy community, and other Federal agencies to provide a better understanding of NTM, enhance diagnostic and treatment options and outcomes, and promote education of health care providers. The Committee also encourages the NHLBI to issue a program announcement or other appropriate mechanism to ensure the initiation of grant proposals.

*Pulmonary Hypertension [PH].*—The Committee continues to view research on PH as a high priority. It encourages the NHLBI to expand its successful SCCOR program in this area and establish

a PH Research Network to facilitate collaboration and data sharing among leading PH investigators.

*Sickle Cell Disease [SCD].*—The Committee encourages the Institute to continue to strengthen its efforts related to the funding of the Comprehensive Sickle Cell Centers, the SCD Comprehensive Clinical Network centers, and related activities. Specifically, the Committee encourages the expansion of opportunities available for patients to participate in large, multi-center clinical trials to support the development of more treatment options and the establishment of a central prospective registry of several thousand well-characterized individuals with SCD. Additionally, the Institute is encouraged to bring new health and medical professionals and researchers into the field to support the next generation of researchers equipped to integrate genomics, proteomics and high-throughput screening expertise into the SCD research field. The Committee also encourages the Institute to expand the use of transgenic mice and a tissue bank facility, and to encourage collaboration between the NHLBI, HRSA, CDC, and national and local organizations. The Committee requests an update on these efforts in the fiscal year 2009 congressional budget justifications.

*Sleep Disorders.*—The Committee continues to urge the National Center on Sleep Disorders Research to partner with other Federal agencies and voluntary health organizations to implement a sleep education and public awareness initiative using the roundtable model.

*Tuberous Sclerosis Complex.*—The Committee urges the NHLBI to support basic research on the mTOR signaling pathway and the role of the TSC1/2 genes in cell growth and proliferation in the heart and lungs. The Committee also urges the NHLBI to continue and expand intramural and extramural programs on lymphangiomyomatosis [LAM], a lung disorder that primarily affects women. In particular, research should focus on the natural history of LAM in TSC and sporadic LAM, as well as support for clinical trials.

NATIONAL INSTITUTE OF DENTAL AND CRANIOFACIAL RESEARCH

Appropriations, 2007 .....	\$389,703,000
Budget estimate, 2008 .....	389,722,000
Committee recommendation .....	398,602,000

The Committee recommendation includes \$398,602,000 for the National Institute of Dental and Craniofacial Research [NIDCR]. The fiscal year 2007 appropriation was \$389,703,000 and the budget requested \$389,722,000. The comparable amounts for the budget estimate include funds to be transferred from the Office of AIDS Research.

As explained in the opening section on the NIH, the budget request includes a contribution to the Common Fund equal to 1.3 percent of the Institutes’s budget. The other amounts do not include any contribution for the Common Fund.

*Temporomandibular Joint and Muscle Disorders [TMJDs].*—The Committee commends the NIDCR for its efforts to increase funding for TMJDs research and stimulate interest in young investigators in TMJD research. The Committee urges the NIDCR to give priority to the recommendations of the Fourth Scientific Meeting of

The TMJ Association, especially those calling for the establishment of Regional TMJD Centers of Excellence. Because the multifaceted nature of TMJDs requires an approach that coordinates the work of many interested parties at the NIH, the Committee expects the NIDCR to continue to collaborate and coordinate research and awareness activities with the NIBIB, NINDS, NIAMS, ORWH and all other relevant ICs as well as the trans-NIH Pain Consortium and the NIH Blueprint for Neuroscience Research. The Committee also urges the NIDCR to consult regularly with patient advocacy groups in the planning of research initiatives.

NATIONAL INSTITUTE OF DIABETES AND DIGESTIVE AND KIDNEY DISEASES

Appropriations, 2007 .....	\$1,705,868,000
Budget estimate, 2008 .....	1,708,045,000
Committee recommendation .....	1,747,784,000

The Committee recommends an appropriation of \$1,747,784,000 for the National Institute of Diabetes and Digestive and Kidney Diseases [NIDDK]. The fiscal year 2007 appropriation was \$1,705,868,000 and the administration’s request is \$1,708,045,000. The comparable amounts for the budget estimates include funds to be transferred from the Office of AIDS Research.

As explained in the opening section on the NIH, the budget request includes a contribution to the Common Fund equal to 1.3 percent of the Institute’s budget. The other amounts above do not include any contribution for the Common Fund.

*Acute Liver Failure.*—The Committee is aware that there is no effective and approved medical procedure to maintain liver function after acute failure for a period of time until a liver becomes available for transplantation or the liver repairs itself naturally. The Committee urges research in this area, consistent with the Liver Disease Research Action Plan, to reduce the mortality rate for those who suffer from acute liver failure.

*Animal Models of Diabetes.*—The Committee applauds the NIDDK, in partnership with the NHLBI, for its renewal of the Animal Models of Diabetic Complications Consortium [AMDCC]. While the AMDCC focuses on rodent models, the NIDDK is also encouraged to support the development and use of larger animal models that more closely mimic diabetes in humans and that can be used for preclinical testing of new therapeutic agents to treat complications.

*Beta Cell Biology.*—The Committee urges the NIDDK to support research focused on translating the fundamental discoveries made by the Beta Cell Biology Consortium into clinical applications that may directly benefit type 1 diabetes patients.

*Clinical Trials for Type 1 Diabetes.*—The Committee urges the NIDDK to continue to expand the pipeline of new therapies being tested by the Type 1 Diabetes TrialNet to accelerate the rate of drug discovery and development to combat type 1 diabetes. For example, anti-CD3 monoclonal antibodies represent a breakthrough in the treatment of type 1 diabetes and, for the first time, provide a way to intervene in the natural history of the disease. The Committee urges the NIDDK and the NIAID to foster mechanistic and clinical research aimed at understanding how anti-CD3 works so

that drug design can be optimized to reduce side effects and define all patient populations who might benefit from anti-CD3 therapy.

*Continuous Glucose Monitoring.*—Recent advances in continuous glucose monitoring technology have the potential to revolutionize the way diabetes is managed on a daily basis, but more research is needed to validate this technology in a variety of patient populations under “real world” conditions. Moreover, biomedical research progress is enabling increasing numbers of type 1 diabetes patients to live with this disease for more than 50 years. The NIDDK is urged to support clinical research on the potential benefits of continuous glucose monitoring in type 1 diabetes patients over the age of 65.

*Cooley’s Anemia.*—The Committee continues to support NIDDK research on iron chelation and non-invasive iron measurement, and to encourage the NIDDK to work closely with the NIBIB to develop and perfect non-invasive means of measuring iron that accumulates in the heart and liver.

*Diabetes in Native Hawaiians.*—The Committee is concerned about the high prevalence of diabetes among Native Hawaiians, and it urges the NIDDK to continue research in this area.

*Digestive Diseases.*—The Committee continues to encourage the NIDDK to expand its Digestive Disease Centers program, with an increased emphasis on irritable bowel syndrome.

*Drug-induced Liver Injury.*—In view of the increasing incidence of liver injury from prescription and nonprescription drugs, the Committee urges an expansion of the Drug-Induced Liver Injury Network.

*Environmental Triggers of Type 1 Diabetes.*—The Committee encourages the NIDDK to ensure that resources are made available to maximize the knowledge about type 1 diabetes that can be gained from The Environmental Determinants of Diabetes in the Young Study [TEDDY], including the support of innovative ancillary studies using biosamples and data collected from TEDDY participants.

*Fragile X.*—The symptoms of Fragile X syndrome include digestive difficulties. The Committee urges the NIDDK to expand its research activities on Fragile X and to coordinate these efforts with other Institutes working on related activities, including the NIMH, NINDS, NICHD, NHGRI and the Fogarty International Center.

*Genetics of Diabetic Kidney Disease.*—The NIDDK is recognized for supporting the whole genome sequencing of the Genetics of Kidneys in Diabetes [GoKinD] collection of genetic samples from nearly 1,900 type 1 diabetes patients and their relatives. This work should help identify the genetic factors that make some diabetic patients more susceptible to kidney disease.

*Genetics of Type 1 Diabetes.*—The Committee commends the NIDDK for its oversight of the International Type 1 Diabetes Genetics Consortium, which is in the final stages of recruiting 2,800 families with two or more children with type 1 diabetes. As the sample collection phase nears completion, the NIDDK is encouraged to support researchers who plan to use the genetic collection to fully understand the genetic causes of type 1 diabetes.

*Glomerular Disease Research.*—The Committee continues to be pleased with the work of the NIDDK in the area of glomerular dis-

ease research, particularly as it relates to focal segmental glomerulosclerosis.

*Hematology.*—Research into basic mechanisms of blood cell formation and function is intimately linked to determining the health risks of different diseases and in developing novel therapies for treatment. An example is the study of anemias of inflammation and chronic disease, which would greatly improve the understanding of chronic infection and immune activation, severe trauma, heart disease, arthritis, and diabetes. The Committee urges the NIDDK, using the findings of the 2006 workshop on this topic, to work with the NHLBI, NCI, NIA, NIAID and NIAMS to develop a research agenda on anemias of inflammation and chronic disease. The Committee requests an update in the fiscal year 2009 congressional budget justification on the research opportunities identified and the next steps to be taken.

*Hepatitis B.*—The Committee is pleased with the NIH commitment to conduct a consensus conference in 2008 on best treatment practices for individuals with hepatitis B. The Committee is aware that there are six hepatitis B pharmaceutical products on the market and that three of them have become available in the last two years. The growing number of treatment options is encouraging and suggests a strong rationale for conducting a consensus conference to provide state of the art treatment guidelines for the practicing physician community. As only approximately one-third of individuals with hepatitis B are aware of their condition, the Committee urges the NIDDK to continue to collaborate with the CDC in the development of a public health strategy to expand the screening of individuals at risk for chronic hepatitis B.

*Hepatitis C.*—The Committee encourages implementation of clinical studies aimed at overcoming antiviral drug resistance to hepatitis C, possibly by utilizing novel agents in combination.

*Inflammatory Bowel Disease [IBD].*—The Committee has been encouraged in recent years by discoveries related to Crohn's disease and ulcerative colitis, collectively known as IBD. The Committee commends the NIDDK for its strong leadership in this area and continues to encourage the Institute to increase funding for research, particularly pediatric research, focused on; (1) the cellular, molecular and genetic structure of IBD, (2) identification of the genes that determine susceptibility or resistance to IBD in various patient subgroups, and (3) translation of basic research findings into patient clinical trials as outlined in the research agenda developed by the scientific community titled, "Challenges in Inflammatory Bowel Disease." The Committee also encourages the NIDDK to continue to strengthen its partnership with the IBD community and increase support for its successful Digestive Disease Centers program with an emphasis on IBD.

*Interstitial Cystitis [IC] and Painful Bladder Syndrome [PBS].*—The Committee is concerned by a pattern of inconsistent funding at the NIDDK on IC/PBS-specific research, and it urges the Institute to make a sustained investment in this area. The Committee urges the NIDDK to issue a request for applications for IC/PBS-specific research in areas that examine predisposition/risk factors, underlying cellular and molecular pathology of IC/PBS and the association/cross-sensitization of IC/PBS with other disorders/dis-

eases. The Committee also encourages translational research in IC/PBS that includes pilot therapy testing and early intervention of lifestyle/behavioral changes to prevent or lessen symptoms. The Committee remains concerned about the lack of clarity surrounding the nomenclature and definition of IC, and it urges the NIDDK to host a meeting of international IC experts that specifically addresses these issues not only to update its own research criteria and clarify its investigative questions on IC but also to ensure that the United States continues to be at the forefront of all IC research activities. In addition, the Committee is discouraged by the lack of progress in the NIDDK-funded RAND study on the epidemiology of IC. The NIDDK is urged to take an active role in the last two years of this study to ensure that any design flaws are addressed, outside experts are consulted and it is well executed.

*Irritable Bowel Syndrome [IBS].*—The Committee is pleased that the NIDDK is formulating an action plan for digestive diseases through the National Commission on Digestive Diseases and that IBS will be included. The Committee continues to urge the NIDDK to expedite this plan and ensure that IBS be given sufficient attention.

*Islet Transplantation.*—The Committee acknowledges the productive collaboration of the NIDDK and NIAID in overseeing the Clinical Islet Transplantation Consortium. The development of seven clinical trial protocols of islet transplantation marks a significant step toward validating this procedure as a viable treatment for Type 1 diabetes patients suffering from extremely “brittle” or difficult-to-control blood sugar levels. The NIDDK and NIAID are urged to take steps to ensure the efficient launch of these trials and to expedite patient recruitment and enrollment.

*Kidney Disease.*—The Committee encourages the NIDDK to expand the kidney disease research infrastructure through an increased number of kidney research core centers to promulgate collaborative research on a local, regional and national level. In addition, the Committee recommends expanded support for investigator-initiated research projects in five priority areas of greatest importance clinically: acute renal failure, diabetic nephropathy, hypertension, transplantation, and uremic cardiovascular toxicity. The Committee commends the NIDDK for moving forward with the Clinical Trials Cooperative Group and supports collaboration with the renal community to seek new strategies and energize clinical investigation in the above-mentioned areas.

*Lupus.*—The Committee encourages the NIDDK to expand and intensify research on lupus, which can damage virtually any organ system in the body, including the kidneys, stomach and intestinal tract.

*Lymphatic Research and Lymphatic Diseases.*—The NIDDK is urged to study the metabolic link between lymphatic function and obesity, dyslipidemia and diabetes. In addition, the Committee strongly urges the NIDDK to study protein-losing enteropathy, a life-threatening complication associated with numerous syndromes involving congenital lymphatic malformations.

*Management of Pediatric Kidney Disease.*—The complexity and variety of causes unique to childhood kidney diseases requires multiple detailed treatment regimens for chronic kidney disease, dialy-

sis and kidney transplantation. When these medication and treatment plans are not followed, patients experience life-threatening complications and costly hospitalizations. The Committee urges the NIDDK to conduct trans-institute trials to study methods to improve adherence with treatment regimens for children and adolescents, particularly in the areas of dialysis and post kidney transplantation. Additionally, the Committee urges NIDDK to support collaborating networks of health care providers to collect data and plan trials to improve therapy for the spectrum of childhood kidney diseases and the transition of children with kidney disease into adulthood.

*National Commission of Digestive Diseases.*—The Committee applauds the continuing work of the National Commission of Digestive Diseases to develop a 10-year plan and urges that the chapter on liver disease encompass the findings and recommendations of the recently updated Liver Disease Research Action Plan.

*Obesity and Translational Research.*—The Committee urges the NIDDK to address the growing obesity crisis by investigating the role of the gastrointestinal tract in regulating food intake, how obesity causes liver disease and colon cancer, and the best treatment options and novel therapeutic approaches for preventing and treating obesity, including novel endoscopic therapies and other approaches that extend beyond existing treatment modalities.

*Obesity-related Liver Disease.*—There has been a dramatic increase in obesity-related chronic liver disease, which may affect as many as one in four adults and a significant number of obese children. This diagnosis encompasses a spectrum of severity with many cases evolving into non-alcoholic steatohepatitis [NASH] and, ultimately, cirrhosis. NASH-related liver disease has already become an important indicator for liver transplantation, and in the absence of better treatments, the need for NASH-related liver transplantation will increase significantly over time. The Committee urges the NIDDK to continue to support fatty liver disease clinical trials that includes both adult and pediatric populations.

*Polycystic Kidney Disease [PKD].*—The Committee is pleased that NIH-supported research has rapidly led to the development of multiple human clinical trials and interdisciplinary studies focused on slowing or even reversing the progression of PKD. However, the Committee is deeply concerned by recent cuts in NIH funding for PKD research, combined with coding errors that made it appear as if NIDDK funding for PKD were higher than the actual figures. Therefore, the Committee strongly urges the NIDDK to increase its investment in PKD research by promoting additional PKD clinical trials and multidisciplinary research, and expanding studies of pathophysiology and molecular biology.

*Prostatitis.*—The Committee supports the efforts of the Chronic Prostatitis Collaborative Research Network [CPCRN] to find the cause and a cure for prostatitis. The past 10 years of research by the CPCRN have produced important progress, and the Committee urges the NIDDK to fund the research to completion.

*Spina Bifida.*—The Committee encourages the Institute to undertake research efforts to study the causes and care of the neurogenic bladder to improve the quality of life of children and adults with spina bifida.

*Tuberous Sclerosis Complex.*—TSC is a genetic disorder that triggers uncontrollable tumor growth in multiple organs of the body including the kidneys, where patients are at risk for polycystic kidney disease [PKD], cancer or, most commonly, benign growths known as angiomyolipoma that can result in kidney failure. The Committee urges the NIDDK to continue to support basic research on the mTOR signaling pathway and the role of the TSC1/2 genes in nutrient sensing, insulin signaling and cell growth and proliferation. The Committee also urges the NIDDK to support research on the link between TSC and PKD.

NATIONAL INSTITUTE OF NEUROLOGICAL DISORDERS AND STROKE

Appropriations, 2007 .....	\$1,535,545,000
Budget estimate, 2008 .....	1,537,019,000
Committee recommendation .....	1,573,268,000

The Committee recommends an appropriation of \$1,573,268,000 for the National Institute of Neurological Disorders and Stroke [NINDS]. The fiscal year 2007 appropriation was \$1,535,545,000 and the budget request is \$1,537,019,000. The comparable amounts for the budget estimates include funds to be transferred from the Office of AIDS Research.

As explained in the opening section on the NIH, the budget request includes a contribution to the Common Fund equal to 1.3 percent of the Institute's budget. The other amounts above do not include any contribution for the Common Fund.

*Alzheimer's Disease.*—The Committee recognizes that the NINDS has funded several new areas of research on Alzheimer's that may ultimately contribute to the development of therapeutics, as well as a translational project involving the screening of small molecules that may prevent mutant proteins linked to inherited forms of the disease from contributing to detrimental cellular changes. The Committee encourages the NINDS to continue to assign a high priority to its Alzheimer research portfolio; expand its research into early diagnosis of Alzheimer's using PET imaging of the brain and to share its results with the Centers for Medicare and Medicaid Services; and to continue to work in collaboration with the NIA, NIMH and other Institutes.

*Basic and Translational Research.*—The Committee recognizes the NINDS for its cooperative efforts in expanding basic and translational research on the processes and mechanisms involved in the experience, expression, and regulation of emotion.

*Brain Tumors.*—The Committee continues to believe that the NINDS should give additional attention to identifying causes of and treatments for brain tumors, and it encourages the Institute to continue working with the NCI to carry out the recommendations of the Report of the Brain Tumor Progress Review Group.

*Charcot-Marie-Tooth [CMT].*—The Committee commends the NINDS for holding a workshop on peripheral neuropathies that focused on developing research opportunities to address CMT. The workshop concluded that a number of specific research directions are relevant to developing treatments for CMT and related disorders, including: (1) the development of high-throughput screening to identify candidate treatments that may currently be available for patients; (2) research into novel mechanisms to repair genetic

abnormalities in patients with CMT; (3) research into interactions between neurons and glial cells that are disrupted and cause disability in many CMT patients; and (4) research into the biological role of inflammatory cells that may exacerbate disability in CMT patients. The Committee strongly urges the NINDS to capitalize on these recommendations and follow up with a relevant program announcement or request for applications. The Committee also requests an update on these activities in the fiscal year 2009 congressional budget justifications.

*Chronic Inflammatory Demyelinating Polyneuropathy [CIDP].*—The Committee urges the NINDS to support research to assist in the diagnosis and treatment of CIDP, a rare disorder of the peripheral nerves characterized by gradually increasing weakness of the legs and arms.

*Cognitive and Emotional Health Project [CEHP].*—The Committee commends the NINDS for its cooperative efforts in producing a searchable database of studies and planning joint efforts to solicit research on enhancing healthy cognitive and emotional function.

*Dandy-Walker.*—The Committee urges the NINDS to form a coordinating committee for Dandy-Walker and hydrocephalus research, and to sponsor a workshop to increase awareness and set national research priorities for these diseases.

*Down Syndrome.*—The Committee notes the recent publication of a number of breakthrough studies concerning the structure and function of synapses in cognitive circuits in mouse models of Down syndrome. These findings suggest that important advances are possible in the near future that could enhance cognitive function in both children and adults with this disorder. The Committee notes that these advances were, in part, forecast by the Down syndrome workshop sponsored by the NINDS. The Committee commends the NINDS for its leadership in organizing the workshop and urges it to build upon the important findings that came out of the meeting. In particular, the Committee encourages the NINDS to identify opportunities for investigating the genetic and cellular basis for abnormalities in the structure and function of cognitive circuits in both the developing and mature nervous systems of people with Down syndrome. The NINDS is also encouraged to work with the NIA to develop strategies to investigate the biology of age-related disorders, such as Alzheimer's disease and Parkinson's disease, in people with Down syndrome.

*Duchenne and Becker Muscular Dystrophy [DBMD] Translational Research.*—The Committee understands that the NIH plans to convene a workshop examining DBMD translational opportunities later this year. The Committee is pleased that these actions are taking place and requests that the NINDS and the Muscular Dystrophy Coordinating Committee develop and submit to the Committee, by February 1, 2008, specific measurable milestones needed to establish a DBMD Translational Research Initiative. This information should be part of the annual report called for under the MD Care Act and be provided by the NINDS, with support from other appropriate Institutes, including the NIAMS and NHLBI. The Committee further requests a detailed timeline for establishing a DBMD translational research initiative by July 1, 2007, and it

urges the involvement of representatives from the six MD centers of excellence.

*Duchenne Muscular Dystrophy.*—The Committee is pleased that the Muscular Dystrophy Coordinating Committee [MDCC] has approved the Action Plan for the Muscular Dystrophies. However, the plan does not make clear the agency or agencies tasked with primary and secondary responsibilities for achieving each of the 76 research objectives. The Committee requests the MDCC to designate those agencies by February 1, 2008. The Committee also encourages the NINDS, NIAMS, and NHLBI to provide the funding needed to support the research agenda at each of the six Paul Wellstone Muscular Dystrophy Cooperative Research Centers.

*Dystonia.*—The Committee continues to support the expansion of research and treatment developments regarding dystonia, and it commends the NINDS for sponsoring the scientific workshop on dystonia in June 2006.

*Epilepsy.*—The Committee applauds the Institute on the second “Curing Epilepsy” conference, held in March 2007, and it encourages the NINDS, along with the epilepsy community, to update the Epilepsy Research Benchmarks to reflect promising future directions for research toward a cure. The Committee requests an update in the fiscal year 2009 congressional budget justifications on the state of the science in epilepsy research and critical areas for future study, which should include collaborative initiatives with the NIMH, NIA, NICHD and patient and scientific organizations.

*Fragile X.*—The Committee strongly endorses accelerated funding for basic and translational Fragile X research, especially efforts to analyze the linkages among Fragile X syndrome, autism, and autism spectrum disorders. The Committee urges the NINDS to participate in the scientific session described under the section on the NICHD and to collaborate with the Fragile X Centers of Excellence as well as the Fragile X Clinics Consortium.

*Hydrocephalus.*—The NINDS is commended for taking lead sponsorship of the 2005 workshop “Myths, New Facts, Clear Directions” to set national research priorities for hydrocephalus. The Committee urges the Institute to significantly increase funding for hydrocephalus research and awareness along with actively soliciting grant applications based on the findings from the workshop. The Committee also encourages the NINDS to seek opportunities to collaborate with other Institutes, including the NIA, NICHD, NEI, NIBIB and ORD, in developing a coordinating committee to support research collaboratively in epidemiology.

*Lupus.*—The Committee encourages the NINDS to expand and intensify research on lupus, which can attack the blood vessels in the brain, causing seizures, psychosis, and stroke.

*Mucopolipidosis Type IV [ML4].*—The gene causing this debilitating genetic metabolic disorder has been identified, so the Committee believes it is timely to increase funding that could lead to a treatment or cure. In particular, this should include research involving other organisms that bear genes resembling the one whose mutation in humans causes ML4.

*Neurofibromatosis [NF].*—The Committee encourages the NINDS to continue its efforts in the creation, implementation and funding of NF pre-clinical and clinical trials infrastructures, including NF

Centers, translational research, genetic and drug screening, training of new NF researchers, and clinical trials using existing and new drugs on NF patients. The Committee applauds the ongoing work of analyzing DNA of NF tumor samples, which not only will help find a treatment for NF but also connect it to other forms of cancers and other diseases.

*Opsoclonus-Myoclonus Syndrome [OMS].*—The Committee continues to urge the Institute to accelerate research efforts to identify OMS susceptibility genes and biomarkers and to develop innovative immunotherapeutic strategies.

*Parkinson's Disease.*—The Committee is concerned that NIH spending on Parkinson's disease research, overall, is declining. The Committee urges the NINDS to dedicate additional funding to pursue promising translational and clinical research that may result in scientific breakthroughs for people living with Parkinson's disease. The Committee commends the NIH for preparing the 2006 Parkinson's Disease Strategic Research Plan and requests a report by June 1, 2008, that would provide additional information on the Plan's implementation, including funding mechanisms used, such as program announcements, requests for proposals; budgetary estimates associated with each of the priority research areas identified by the Plan; anticipated next steps; and necessary funding levels.

The Committee continues to support the Morris K. Udall Parkinson's Disease Research Centers of Excellence and applauds the creation of an additional center to further focus and manage their interdisciplinary efforts. The Committee further encourages NIH to require that the centers include a significant clinical component, in addition to their ongoing basic and translational research.

*Peripheral Neuropathy.*—More than 60 percent of diabetic patients experience some degree of nerve damage that can lead to skin ulceration on the feet, poor wound healing, and, in extreme cases, lower limb amputation. The NINDS is recognized for organizing a workshop of leading experts in diabetic nerve damage who defined challenges and barriers to the successful implementation of clinical trials to combat this long-term complication. The NINDS is urged to consider establishing a clinical trial network to design and conduct clinical research protocols of new agents to prevent or treat diabetic nerve damage.

*Spina Bifida.*—The Committee encourages the Institute to continue and expand research to address issues related to the prevention and treatment of spina bifida and associated secondary conditions such as hydrocephalus.

*Spinal Muscular Atrophy [SMA].*—The Committee commends the NINDS for the advancement of the SMA Therapeutics Development program and strongly urges the Institute to continue identifying and completing preclinical research and development of SMA drug candidates. The Committee urges the NINDS to plan and budget for the successive stages of the project, including, most importantly, funding for clinical trials and infrastructure (e.g., site support, patient registries, biomarker development and natural history studies). Lastly, the Committee notes the need to expand basic research funding on SMA and requests that a request for applications be issued.

*Stroke.*—The Committee commends the Institute for its leadership in initiating a strategic planning process for stroke research and expects that the NINDS will work with experts in the field to develop this initiative. The Committee urges the Institute to aggressively expand its investment in basic, clinical, translational, and trans-institute stroke research through all available mechanisms. The Committee is encouraged that the NINDS convened stroke experts to conduct a midpoint review of the 10-year plan outlined in the Stroke Progress Review Group report. The Committee strongly supports the full and timely implementation of the SPRG report, and it requests a written update on the implementation of the report by July 1, 2008, highlighting activities and initiatives for each of the remaining fiscal years of the plan.

*Stroke Rehabilitation.*—The Committee notes the growing body of evidence that stroke victims do not achieve the fullest possible recovery from rehabilitation because of limited awareness of appropriate rehabilitation protocols. The Committee therefore urges the convening of an experts panel to examine this issue with the goal of developing consensus treatment protocols. Finally, the Committee urges implementation of the Stroke Progress Review Report’s recommendations on recovery and rehabilitation.

*Tuberous Sclerosis Complex [TSC].*—The Committee applauds the leadership undertaken at the NINDS to coordinate research on TSC through the Trans-NIH Tuberous Sclerosis Coordinating Committee. The Committee believes the scope of the committee should be broadened to include planning of international conferences and annual targeted workshops on specific areas of TSC research. The Committee also urges the NINDS Human Genetics Resource Center to develop a TSC DNA Repository that would serve as a research resource for the TSC research community. Finally, the Committee urges the NINDS to stimulate and support research on the role of early-onset seizures in TSC and subsequent cognitive development.

*Vulvodynia.*—The Committee urges the NINDS, in coordination with the NICHD, ORWH, NIH Pain Consortium and other ICs, to expand its support of research in vulvodynia, with a focus on etiology and multi-center therapeutic trials. The Committee also calls on the NINDS to work with the ORWH and other relevant ICs and government agencies, as well as patient and professional organizations, to implement an educational outreach campaign on vulvodynia.

NATIONAL INSTITUTE OF ALLERGY AND INFECTIOUS DISEASES

Appropriations, 2007 .....	\$4,367,708,000
Budget estimate, 2008 .....	4,592,482,000
Committee recommendation .....	4,668,472,000

The Committee recommends an appropriation of \$4,668,472,000 for the National Institute of Allergy and Infectious Diseases [NIAID]. The fiscal year 2007 appropriation was \$4,367,708,000 and the budget request is \$4,592,482,000. Included in these funds is \$300,000,000 to be transferred to the Global Fund to Fight HIV/AIDS, Malaria, and Tuberculosis. The fiscal year 2007 transfer amount was \$99,000,000. The comparable amounts for the budget

estimate include funds to be transferred from the Office of AIDS Research.

As explained in the opening section on the NIH, the budget request includes a contribution to the Common Fund equal to 1.3 percent of the Institute's budget. The other amounts above do not include any contribution for the Common Fund.

The Committee has included bill language requested by the President that allows sums obligated in fiscal years 2003 through 2007 for extramural facilities construction grants to remain available until expended.

*Antiviral Drug Resistance.*—One of the major challenges in implementing therapies for hepatitis B and hepatitis C is antiviral drug resistance. The Committee encourages the development of standardized terminology to describe this resistance, as well as studies of the mechanism of resistance and methods to overcome it.

*Asthma.*—The Committee urges the NIAID to continue to improve its focus and effort on asthma management, especially as it relates to children.

*Atopic Dermatitis and Asthma/Allergic Diseases.*—The Committee applauds the NIAID for focusing on atopic dermatitis [AD] as a risk factor for adverse reactions to the smallpox vaccine. However, the Committee believes that the NIAID should focus additional attention on the relationship between AD and asthma and other allergic diseases. Studies have confirmed that individuals with severe AD are more likely to develop particularly severe asthma and allergies. The Committee encourages the NIAID to coordinate with other Institutes on a multidisciplinary initiative to encourage investigator-initiated research projects on AD as it relates to the progression to asthma and other allergic diseases as well as changes in immune responses to allergen exposure in sensitized patients.

*Autoimmune Disease Research.*—The Committee commends the NIAID for its successful renewal of the Autoimmune Prevention Centers initiative, which has generated and tested innovative ideas in autoimmune research.

*Biocontainment Labs.*—In 2003, the NIH awarded contracts for construction of two extramural National Biocontainment Laboratories for research on infectious agents and related countermeasures. These facilities are due to open in 2008. The Committee encourages NIH to provide the Committee with its strategic plan for the continued operations of these facilities and for protection of the substantial Federal investment in them.

*Drug Development for Type 1 Diabetes.*—The NIAID, in collaboration with the NIDDK, is recognized for its successful renewal of the Immune Tolerance Network [ITN], which designs and conducts clinical trials of new immune modulating therapies for type 1 diabetes and other diseases. The Committee encourages the NIAID to continue to explore opportunities for testing drugs that are already approved by the FDA for other indications for use as therapies for Type 1 diabetes.

*Food Allergy and Anaphylaxis.*—The Committee is pleased that the NIAID plans to solicit grant applications for research on food allergy, and it urges the highest possible level of funding for this initiative. The Committee believes that a similar, complementary

effort should be undertaken with respect to anaphylaxis. A report of a second symposium on anaphylaxis co-sponsored by the NIAID highlighted a number of areas requiring additional research, including the identification of relevant biomarkers; improved understanding of the basic immunology and pathophysiology of anaphylaxis; and studies of the mechanisms that determine the severity of allergic reactions and the variability of organ system responses. The report also noted that the three-step treatment follow-up recommended for anaphylaxis is “infrequently performed in North American emergency departments.” The Committee urges the NIAID to stimulate investigator-initiated research on anaphylaxis including clinical studies of ways to improve its diagnosis and prevention as well as emergency treatment. The Committee requests a report outlining these efforts in the fiscal year 2009 congressional budget justifications.

*Hepatitis B.*—The Committee encourages the NIAID to continue work in the area of therapeutic drug discovery for hepatitis B.

*Inflammatory Bowel Disease [IBD].*—The Committee continues to encourage the NIAID to expand its research partnerships with the IBD community and increase funding for research focused on the immunology of IBD and the interaction of genetics and environmental factors in the development of the disease, particularly in pediatric populations.

*Liver Transplantation.*—The Committee applauds the significant progress in developing successful techniques for liver transplantation, but notes that more work remains on improving the long-term quality of life of individuals who receive such transplants. The Committee urges additional research in this area, as well as research to improve patient and graft survival, and pre-transplant graft evaluation and preservation, with a particular focus on research to reduce and eventually eliminate a transplant recipient’s dependence on immunosuppressive drugs.

*Lupus.*—The Committee urges the NIAID to expand and intensify genetic, clinical, and basic research on lupus, with particularly strong focus on gene-gene and gene-environmental interactions, epidemiological research, biomarkers, pediatric research, environmental factors, and factors related to the health disparities and comorbidities associated with this diseases.

*Lymphatic Research and Lymphatic Diseases.*—With a portfolio that includes chronic infections, immune-mediated diseases, transplantation, allergy, asthma and airway infections, the NIAID has a significant stake in advancing lymphatic research. The Committee urges the NIAID to work closely with the NHLBI to support research that addresses the immune functions of the lymphatic system and the role of immune mechanisms and inflammation in lymphatic diseases, with particular attention to the immunodeficient complications associated with congenital lymphatic malformations and lymphedema.

*Malaria.*—The Committee urges the NIAID to allocate additional resources to support malaria vaccine development, drug development, diagnostics, vector control, infrastructure and research capability, and to strengthen components of the Implementation Plan for Global Research on Malaria. The Committee is concerned that reports of drug-resistant malaria and insecticide-resistant mosqui-

toes are on the rise. To that end, the Committee urges the NIAID to undertake additional research on the basic biology and ecology of mosquitoes, as well as work in genomics to develop new insecticides or render mosquitoes incapable of transmitting malaria.

*Nontuberculous Mycobacteria [NTM].*—The Committee commends the NIAID for its planning meetings regarding NTM and recommends further collaboration with the NHLBI, the advocacy community and other Federal agencies. The Committee encourages the NIAID to advance the understanding of NTM by establishing a national registry of patients. Further, the Committee encourages the NIAID to issue a program announcement or other appropriate mechanism to ensure the initiation of grant proposals and other activities in NTM.

*Parasitic Tropical Diseases.*—The Committee urges the NIAID to continue research on the development of new vaccines, diagnostics, and safe, effective treatments for cholera, African trypanosomiasis (African Sleeping Sickness), American trypanosomiasis (Chagas disease), visceral leishmaniasis, Buruli ulcer, and other debilitating parasitic infections.

*Primary Immunodeficiency [PI] Diseases.*—The NIAID is the lead agency for research into bone marrow transplantation, which can cure some primary immunodeficiencies. The Institute has made significant progress in reducing graft versus host disease [GVHD] and improving therapies when GVHD develops. With newborn screening of certain PI diseases being piloted in the States, the Committee urges the Institute to redouble its efforts to assure that identified patients have the best possible chance for survival.

*Tuberculosis.*—The Committee is extremely concerned about the spread of tuberculosis in the United States and around the world, and urges the NIAID to continue supporting research toward the development of improved medications; an effective, safe vaccine; and diagnostics.

*U.S. Immunodeficiency Network [USIDNet].*—The Committee recognizes the importance of the USIDNET research and training portfolio and urges the NIAID to increase support for the consortium. This unique program provides a mechanism to foster progress in this important and under-supported group of primary immunodeficiency diseases [PIDD] that historically have impacted clinical medicine far beyond their proportional representation in the population. The program supports research in this area by both new and established investigators with a goal of training the next generation of clinicians and scientists to take on the questions that can continue to benefit the greater population with suppressed immune systems. A DNA and cell repository and an immunodeficiency patient registry have been established to further facilitate research in this area. The registry can provide a mechanism of improved communication with patients to assist recognition of new patterns of disease and long-term surveillance of the effect of therapeutics and live-agent vaccines in this patient group.

NATIONAL INSTITUTE OF GENERAL MEDICAL SCIENCES

Appropriations, 2007 .....	\$1,935,808,000
Budget estimate, 2008 .....	1,941,462,000
Committee recommendation .....	1,978,601,000

The Committee recommendation includes \$1,978,601,000 for the National Institute of General Medical Sciences [NIGMS]. The fiscal year 2007 appropriation was \$1,935,808,000 and the administration's request is \$1,941,462,000. The comparable amounts for the budget estimate include funds to be transferred from the Office of AIDS Research.

As explained in the opening section on the NIH, the budget request includes a contribution to the Common Fund equal to 1.3 percent of the Institute's budget. The other amounts above do not include any contribution for the Common Fund.

*Behavioral Research.*—The Committee continues to be concerned that the NIGMS does not support basic behavioral research. The Institute's statutory mandate includes basic behavioral research and training, and the Committee believes that the NIGMS has a scientific mandate in this area because of the clear relevance of fundamental behavioral factors to a variety of diseases and health conditions. To date, the NIGMS has not responded to this concern despite the recommendation of an NIH working group that called for the establishment of such a program, and similar recommendations from the National Academy of Sciences, the Institute of Medicine, and others. The Committee expects the NIGMS to support basic behavioral research and training.

*Training Programs.*—The Committee continues to be pleased with the quality of NIGMS's training programs, particularly those that have a special focus on increasing the number of minority scientists. In addition, the Committee encourages the NIGMS to seek out innovative partnerships with professional societies and other scientific and educational organizations to recruit and retain minority or disadvantaged students in the research pipeline.

#### NATIONAL INSTITUTE OF CHILD HEALTH AND HUMAN DEVELOPMENT

Appropriations, 2007 .....	\$1,254,707,000
Budget estimate, 2008 .....	1,264,946,000
Committee recommendation .....	1,282,231,000

The Committee recommends an appropriation of \$1,282,231,000 for the National Institute of Child Health and Human Development [NICHD]. The fiscal year 2007 appropriation was \$1,254,707,000 and the administration's request is \$1,264,946,000. The comparable amounts for the budget estimate include funds to be transferred from the Office of AIDS Research.

As explained in the opening section on the NIH, the budget request includes a contribution to the Common Fund equal to 1.3 percent of the Institute's budget. The other amounts above do not include any contribution for the Common Fund.

*Adverse Pregnancy Outcome.*—A recent national study showed that the rate of pre-term births among first pregnancies has increased 50 percent over the past decade; women in their first pregnancy are at highest risk for developing preeclampsia; and black women have a two-fold higher risk of these problems than white women. The Committee requests that the NICHD launch an intensive research study of first pregnancy women in order to fill the major gap in the research on the etiology, mechanisms and prevention of these complications. The Committee also urges the NICHD to investigate the rates of adverse pregnancy outcomes in preg-

nancies associated with assisted reproductive technology [ART]. The Committee urges the NICHD to support a multi-center cohort study on ART that would emphasize pregnancy outcomes, and short-and long-term effects on children, to determine if the adverse outcomes are specifically related to ART procedures versus underlying factors within the couple.

*Behavioral Science.*—The Committee continues its strong support for the broad portfolio of behavioral research at the NICHD.

*Childhood Obesity.*—The Committee continues its support for NICHD research on the behavioral and social factors that contribute to childhood obesity.

*Demographic Research.*—The Committee applauds the NICHD for its strong support of demographic research, which has resulted in a greater understanding of such topics as family dynamics and immigration. The NICHD is encouraged to provide additional resources on research that addresses the future of America's families, including the forces affecting birth rates and family investments in children. The Institute should also actively support opportunities for interdisciplinary research into the complex socioeconomic and biological mechanisms that produce health disparities within our population. To ensure the continued vitality of this program, the Committee urges the NICHD to maintain its levels of investment in demographic training and infrastructure support.

*Diabetes Research in Children.*—The Committee commends the NICHD for its support of the Diabetes Research in Children Network [DirecNet], which has made excellent progress in studying glucose control and the application of new technologies in a pediatric population with diabetes.

*Dietary Intervention to Prevent Juvenile Diabetes.*—The Committee applauds the NICHD for its oversight of the Trial to Reduce IDDM in the Genetically at Risk [TRIGR] study, which is testing whether substitution of hydrolyzed cow's milk in an infant's diet can reduce the rate of type 1 diabetes in children. The Committee urges the NICHD to continue its strong support of TRIGR to follow the study participants over the next 10 years.

*Down Syndrome.*—The Committee commends the NICHD on earlier efforts to supply mouse models of Down syndrome for the research community. It now encourages the NICHD to partner with the NINDS and other agencies to define additional mouse models needed to link important structural and functional abnormalities that underlie cognitive difficulties to the actions of specific genes and gene pathways. The Committee urges the NICHD to take a leadership role in providing a robust research portfolio that addresses the problems that affect children with Down syndrome and to work collaboratively with other Institutes to carry out this mission.

*Early Language Development.*—The Committee applauds the NICHD's continued support of research in early language development, particularly studies that underscore the importance of social interaction as a necessary component for language learning. The Committee encourages further research to help understand which components of social interaction are critical for language development, and how this knowledge can be used to improve the linguistic skills of those with social impairments.

*Epilepsy.*—Epilepsy often begins in childhood, and even in its mildest forms can modify brain development, with lifelong effects on cognitive processes ranging from learning disabilities to severe developmental disabilities. Recurring seizures are also common for children with autism, brain tumors, cerebral palsy, mental retardation, tuberous sclerosis and a variety of genetic syndromes and may dramatically add to the burden of these disorders. The Committee urges the NICHD to make research in epilepsy a priority, with particular emphasis on developmental effects, and to coordinate these efforts with the NINDS.

*Family Formation.*—The Committee encourages the NICHD to continue to fund research on effective ways to promote and sustain healthy family formations, particularly for low-income families and families of color.

*Fragile X.*—The Committee strongly encourages the NICHD to support upcoming clinical drug trials of pharmaceuticals indicated for treatment for Fragile X. In addition, the Committee endorses accelerated funding for basic and translational Fragile X research, including efforts to analyze the linkages among Fragile X, autism, and autism spectrum disorders. The Committee is encouraged by the efforts of all of the Institutes supporting Fragile X research to coordinate Fragile X research and encourages them to intensify and expedite this effort. The Committee urges the NIH, through the NICHD and other participating Institutes, to convene a scientific session in 2008 to develop pathways to new opportunities for collaborative, directed research across Institutes, and to produce a blueprint of coordinated research strategies and public-private partnership opportunities for Fragile X. In these efforts, the NICHD is urged to collaborate with the three existing federally funded Fragile X Centers of Excellence as well as the Fragile X Clinics Consortium. The Committee requests the NICHD to report to Congress by September 1, 2008, on its progress in achieving these goals. The Committee also urges the NICHD to continue to prioritize Fragile X as a key prototype in the development of cost-effective newborn screening programs.

*Fragile X-associated Premature Ovarian Failure [POF].*—POF is a condition in which the ovaries stop functioning normally in a woman younger than age 40. Studies show that it is often associated with the FMR1 gene, the same gene that causes Fragile X syndrome. The Committee acknowledges the importance of furthering research into the FMR1 premutation to inform the research community about the genetic causes of infertility and disorders of altered ovarian function. The Committee supports further research efforts focused on collecting genetic information from women who possess a mutation of the FMR1 gene as well as women who have POF. To accomplish this goal, the Committee urges the NICHD to include the collection of genetic data on women who are relatives of people living with Fragile X in the development of a National Fragile X Patient Registry in order to facilitate genetic screening and counseling services for family members who may be at risk of Fragile X. Additionally, the NICHD is encouraged to address POF as it relates to the FMR1 gene in the development of a blueprint on Fragile X research opportunities.

*Liver Wellness in Children.*—The National Children's Study provides a unique opportunity to study the prevalence of obesity-related chronic liver disease, also known as non-alcoholic steatohepatitis [NASH], from birth to early adulthood. The Committee urges the NICHD to analyze the prevalence of NASH under the NCS to better understand obesity-related chronic illnesses in children and to work with other agencies in the screening and prevention of these diseases.

*Mental Retardation.*—The Committee recognizes the contributions of the Mental Retardation/Developmental Disabilities Research Centers [MRDDRC] toward understanding why child development goes awry, discovering ways to prevent developmental disabilities, and discovering treatments and interventions to improve the lives of people with developmental disabilities and their families. The Committee is particularly pleased with the MRDDRC contributions in the areas of autism, Fragile X syndrome, Down syndrome and other genetic and environmentally induced disorders. However, the Committee is concerned that the MRDDRCs do not have sufficient resources to sustain the progress made in this critical area and is especially concerned with the cut in support for recently funded centers. The Committee urges the NICHD to restore these reductions and to the extent possible provide additional resources to the MRDDRCs.

*National Center for Medical Rehabilitation Research [NCMRR].*—The Committee notes that while the NCMRR has the lead at NIH for medical rehabilitation, 15 other institutes and centers also fund research in this area. The Committee urges the NCMRR to provide leadership for this trans-NIH research and to increase its focus on institutional and career development awards with the goal of raising the applicant success rates of the several under-represented health professions that can contribute significantly to the field, such as occupational therapists. The Committee also urges the NCMRR to support research on pulmonary rehabilitation.

*Neurofibromatosis.*—The Committee continues to encourage the NICHD to issue RFAs for NF research, aggressively pursue and expand funding of clinical trials for NF patients in the area of learning disabilities and support the creation of NF Centers involved with treating and curing learning disabilities.

*Preterm Birth.*—The Committee commends the NICHD for its sustained investment in prematurity research through the Maternal-Fetal Medicine Network, the Neonatal Research Network and the Genomics and Proteomics Network. The Committee strongly encourages the NICHD to expand research on the underlying causes of preterm delivery and the development of treatments for the prevention of premature birth.

*Primary Immunodeficiency [PI] Diseases.*—The Committee continues to support the NICHD's efforts to educate physicians and the public regarding this class of about 140 diseases. The Committee also encourages the Institute's focus on newborn screening research as States begin to implement pilot newborn screening programs for SCID, one of the most severe forms of PI. The NICHD is urged to coordinate its efforts with the CDC and the States in this implementation period.

*Obstetric Systematic Reviews.*—The Committee continues to encourage the NICHD to support obstetric systemic reviews, which provide an important resource to practicing physicians and the general public.

*Spina Bifida.*—The Committee strongly urges the NICHD to make a greater investment in the prevention and treatment of spina bifida and its associated secondary conditions. In particular, the Committee urges a stronger emphasis on understanding the myriad co-morbid conditions experienced by children with spina bifida, including paralysis and developmental delay.

*Spinal Muscular Atrophy [SMA].*—The Committee has stated in previous years that improving the diagnosis of SMA and accelerating the development of treatments for this disease is consistent with the NICHD's mission. However, the Committee is concerned that the NICHD has dedicated only minimal resources specifically to initiate work and sustain ongoing resources for SMA. The Committee again urges the NICHD to fund specific basic, translational and clinical research initiatives on SMA. Further, the Committee urges the NICHD to coordinate its efforts with the NINDS and NIGMS.

*Stillbirth.*—The Committee applauds the NICHD's efforts to address stillbirth and urges the Institute to fully fund the cooperative network's ongoing study using a standard protocol at five clinical sites.

*Tuberous Sclerosis Complex [TSC].*—Individuals with TSC—many of whom are infants and young children—face a lifetime of suffering with seizures, behavioral disorders, autism and mental retardation. The Committee urges the NICHD to stimulate and support research on the link between autism and TSC, specifically the role of the TSC1/2 genes in autism. The Committee also urges the NICHD to stimulate and support research on the role of early-onset seizures in TSC and subsequent cognitive development.

*Uterine Fibroids.*—The Committee encourages the NICHD to expand, intensify, and coordinate programs for the conduct and support of research with respect to uterine fibroids. Current research and available data do not provide adequate information on the rates of prevalence and incidents of fibroids in Asian, Hispanic, and other minority women, the costs associated with treating fibroids, and the methods by which fibroids may be prevented in these women.

*Vulvodynia.*—As a result of efforts funded by the NICHD, the number of highly qualified scientists interested in researching vulvodynia has greatly increased. The Committee commends the NICHD for reissuing its program announcement in this area; however, to ensure that experts in vulvodynia, and related chronic pain and female reproductive system conditions, are adequately represented on peer review panels, the Committee recommends that future program announcements on vulvodynia be issued with "special review." The Committee commends the NICHD for supporting two new projects on vulvodynia in 2006 and strongly urges the Institute to increase the number of awards for vulvodynia studies in fiscal year 2008, with a particular emphasis on etiology and multicenter therapeutic trials. Finally, the Committee commends the NICHD for working with the ORWH to implement an educational

outreach campaign on vulvodynia, and calls upon the Institute to continue these efforts.

NATIONAL EYE INSTITUTE

Appropriations, 2007 .....	\$667,116,000
Budget estimate, 2008 .....	667,820,000
Committee recommendation .....	681,962,000

The Committee recommends an appropriation of \$681,962,000 for the National Eye Institute [NEI]. The fiscal year 2007 appropriation was \$667,116,000 and the budget request is \$667,820,000. The comparable amounts for the budget estimate include funds to be transferred from the Office of AIDS Research.

As explained in the opening section on the NIH, the budget request includes a contribution to the Common Fund equal to 1.3 percent of the Institute’s budget. The other amounts above do not include any contribution for the Common Fund.

*Age-related Macular Degeneration [AMD].*—The Committee commends the NEI for its trans-institute research into the cause, prevention and treatment of AMD, the Nation’s leading cause of blindness, including the identification of gene variants associated with an increased risk for AMD, which presents an opportunity to predict and preempt the disease. The Committee encourages further research into diagnostics for early detection and appropriate therapies. The Committee also applauds the NEI for initiating the second phase of its Age-related Eye Disease Study [AREDS], in which additional dietary supplements are being studied to determine if they can demonstrate or enhance their protective effects against progression to the advanced form of AMD, as shown with dietary zinc and antioxidant vitamins in the study’s first phase.

*Diabetes Management Devices.*—The Committee is aware that a significant proportion of Americans with diabetes are visually impaired and that there are currently no state-of-the-art glucose monitoring or insulin delivery devices that are user-friendly and accessible to Americans with blindness and low vision. The Committee therefore urges the NEI, in collaboration with the NIDDK and the Food and Drug Administration, to sponsor a scientific workshop that would include representatives from diabetes management device manufacturers and representatives of organizations that address the technology access needs of Americans with low vision or blindness to document and clarify the technical capabilities of the devices currently on the market and to develop standards for device accessibility for Americans with low vision or blindness.

*Diabetic Eye Disease.*—The Committee applauds the NEI for the collaborative efforts of the Diabetic Retinopathy Clinical Research Network to test innovative treatments for diabetic eye disease. The Institute is encouraged to expand and extend the network by increasing the number of clinical trials with new drugs and therapeutics that can treat and prevent diabetic retinopathy.

NATIONAL INSTITUTE OF ENVIRONMENTAL HEALTH SCIENCES

Appropriations, 2007 .....	\$642,002,000
Budget estimate, 2008 .....	637,406,000
Committee recommendation .....	656,176,000

The Committee recommends an appropriation of \$656,176,000 for the National Institute of Environmental Health Sciences [NIEHS]. The fiscal year 2007 appropriation was \$642,002,000 and the budget request was \$637,406,000. The comparable amounts for the budget estimate include funds to be transferred from the Office of AIDS Research.

As explained in the opening section on the NIH, the budget request includes a contribution to the Common Fund equal to 1.3 percent of the Institute's budget. The other amounts above do not include any contribution for the Common Fund.

*Alternative Methods.*—The Committee commends the National Interagency Center for the Evaluation of Alternative Methods/ Interagency Coordinating Committee on the Validation of Alternative Methods [NICEATM/ICCVAM] for commencing a process for developing a 5-year plan to research, develop, translate and validate new and revised non-animal and other alternative assays for integration of relevant and reliable methods into the Federal agency testing programs. The 5-year plan shall be used to prioritize areas, including tiered testing and evaluation frameworks, that have the potential to most significantly and rapidly reduce, refine or replace laboratory animal methods while at the same time providing an adequate degree of scientific certainty for protection of health and the environment.

*Asthma.*—Given the link between environmental factors and the onset of asthma, chronic obstructive pulmonary disease [COPD], and pulmonary fibrosis, the Committee encourages the NIEHS to further develop research initiatives to understand the environmental and genetic risk factors for predisposing some individuals to and in controlling the severity of these lung diseases.

*Autism.*—The Committee remains strongly interested in possible environmental causes or triggers of autism. The Committee commends the NIEHS for convening an expert panel in May 2006 regarding thimerosal exposure in response to fiscal year 2006 report language. The report from the workshop, titled "Thimerosal Exposure in Pediatric Vaccines," concluded that comparing the rates of autism in the Vaccine Safety Datalink [VSD] over the time period before, during and after the removal of thimerosal from most childhood vaccines would be "uninformative and potentially misleading." The report also outlined three alternate studies that could address possible associations between thimerosal exposure and increased rates of autism. The Committee urges the NIEHS to evaluate the merit of conducting these alternate studies and provide an update in the fiscal year 2009 congressional budget justifications.

*Behavioral Research.*—The Committee encourages the NIEHS to maintain its steps toward integrating basic behavioral and social science research into its portfolio. The NIEHS is urged to expand partnerships with OBSSR and other institutes to fund research on common interest including gene and environment interactions and health.

*Bone Marrow Failure Diseases.*—While there are no known causes of bone marrow failure diseases such as aplastic anemia, myelodysplastic syndromes [MDS], and paroxysmal nocturnal hemoglobinuria [PNH], they have been linked to environmental fac-

tors. The Committee encourages the NIEHS to work with the NHLBI and NCI to fund research that explores these links.

*Genes and Environment Initiative.*—The Committee strongly supports the trans-institute effort of the NIEHS and NHGRI to identify the genetic and environmental underpinnings of asthma, diabetes, cancer, and other common illnesses, focusing on the development of innovative technologies for assessing the role that environmental exposures and genetic variation play in the risk of developing disease.

*Global Environmental Health.*—The Committee encourages the Institute's effort to develop a Global Environmental Health Initiative designed to identify diseases where environment plausibly constitutes a significant contributor to human disease, develop methodological approaches for advancing research and interventions/therapies on this topic, and support successful and meaningful research in global environmental health.

*Lupus.*—As lupus can be triggered by environmental factors, the Committee encourages the Institute to expand and intensify research on this disease.

*Parkinson's Disease.*—The Committee commends the NIEHS for funding the Collaborative Centers for Neurodegenerative Disease Environmental Research [CCNDER] to foster multidisciplinary research approaches to elucidate gene-environment interactions in neurodegenerative diseases. The Committee encourages the NIEHS to ensure that the CCNDER program continues to pursue promising Parkinson's research resulting from the Collaborative Centers for Parkinson's Disease Environmental Research [CCPDER] program. The Committee also encourages the NIEHS to work in conjunction with other NIH institutes and CDC, as necessary, to investigate the incidence of Parkinson's disease, including age, occupation, and geographic population clusters, and related environmental factors relating to the disease. The Committee requests an update on these efforts in the report discussed under the NINDS.

#### NATIONAL INSTITUTE ON AGING

Appropriations, 2007 .....	\$1,047,260,000
Budget estimate, 2008 .....	1,047,148,000
Committee recommendation .....	1,073,048,000

The Committee recommendation includes \$1,073,048,000 for the National Institute on Aging [NIA]. The fiscal year 2007 appropriation was \$1,047,260,000 and the budget request was \$1,047,148,000. The comparable amounts for the budget estimate include funds to be transferred from the Office of AIDS Research.

As explained in the opening section on the NIH, the budget request includes a contribution to the Common Fund equal to 1.3 percent of the Institute's budget. The other amounts above do not include any contribution for the Common Fund.

*Aging and the Workplace.*—NIA is encouraged to continue its program of research on aging and work, on such important topics as improved design of jobs, the workplace, and work schedules to accommodate an aging workforce; potential changes in benefit plans for an aging workforce; and changing attitudes toward work and retirement as the baby boom generation reaches what was once considered the age of retirement.

*Alzheimer's Disease.*—Unless science soon finds ways to prevent, cure or more effectively treat Alzheimer's, by mid-century as many as 16 million persons will be living with this disease. To prevent this will require a stepped-up investment in a comprehensive Alzheimer research strategy that includes: basic investigator-initiated research to isolate the best targets for drug development; cost-effective interdisciplinary research across multiple institutions that shares data and biological materials; multi-site clinical trials to test potential therapies; and larger-scale clinical studies, including neuroimaging techniques, to find early biomarkers of disease so as to speed drug discovery and to identify those at risk so treatment can start soon enough to make a difference. As the lead institute in Alzheimer research, the NIA is urged to expand its investment into finding more effective treatments and prevention strategies for at-risk individuals.

*Behavioral Research.*—The Committee commends the NIA for participating in the Cognitive and Emotional Health Project in collaboration with the NIMH and NINDS, which will support research on maintaining cognitive and emotional health in later life.

*Biology of Aging.*—The Committee commends the NIA for work it has done to improve understanding of the biological factors that regulate the processes of aging. These new discoveries have led many scientists to believe that it may become possible to postpone the onset of a wide range of fatal and disabling diseases, in a coordinated fashion, by retardation of the aging process. It is widely understood that chronic illness is a powerful driver of medical costs, which in the United States are expected to reach \$16,000,000,000,000 annually by 2030. To alleviate this financial burden and to develop interventions that can extend health and longevity, the Committee urges the NIH to increase dramatically its annual investment in the biological basis of aging.

*Bone Strength.*—The Committee continues to encourage the NIA, in conjunction with the NIAMS, NIBIB, NICHD, NIDDK, NCRR and NHLB, to support research, including research on bone structure and periosteal biology, that will achieve identification of the parameters that influence bone strength and lead to better prediction for prevention and treatment of bone diseases.

*Demographic and Economic Research.*—The Committee urges the NIA to sustain its commitment to the Demography of Aging centers program and continue its current support of the economic and demographic components of the Roybal Centers for Applied Gerontology. Finally, the Committee commends the NIA for elevating the dialogue surrounding global aging issues by hosting with the Department of State the Summit on Global Aging.

*Down Syndrome.*—The Committee commends the NIA for its support of studies to examine the cellular, molecular and genetic bases for age-related neuropathological and cognitive abnormalities in people with Down syndrome. It encourages the NIA to further examine these abnormalities and to devise new methods for diagnosing and treating them. Given that all people with Down syndrome develop the neuropathological changes of Alzheimer's disease, and that many or most go on to suffer dementia, the NIA is encouraged to consider how studies of the Down syndrome population might enhance the ability to understand, diagnose and treat

Alzheimer's disease. The Committee urges the NIA to collaborate with other institutes to address the issues that face elderly adults with Down syndrome.

*Epilepsy.*—The Committee urges the NIA, working with the NINDS, to continue research on why epilepsy develops in association with diseases of the elderly and to develop therapies to prevent the occurrence of seizures and to diminish their consequences in this population.

*Exercise and Aging.*—Given the positive impact of exercise on many aspects of aging, from improved cognition and decreased depression to fewer falls and fractures, the Committee is very supportive of NIA's taking additional steps in exercise research.

*Fragile X-Associated Tremor/Ataxia Syndrome [FXTAS].*—The Committee urges the NIA to expand its existing dialogue with the NINDS to fund research on FXTAS. Given the link between FXTAS and adult-onset disorders, this disease may serve as a gateway to understanding parkinsonism and dementia. The NIA is urged to participate in the NIH's efforts to develop a coordinated design of Fragile X research strategies and public-private partnership opportunities as they relate to FXTAS.

*Healthy Brain.*—The Committee encourages the NIA's cooperation with other Institutes and Centers on the Healthy Brain Project.

*Hematology.*—The Committee commends the Institute for its increased emphasis on research in thrombotic disorders and anemia in the elderly. The frequency of other hematologic diseases, including most of the blood cancers, also increases dramatically with age. The Committee encourages the NIA to further its efforts in research in hematologic issues affecting the elderly, including hematologic malignancies and anemias of inflammation and chronic disease.

*Stereotypes.*—The NIA is encouraged to expand its work on the role of stereotypes in the functioning of the aging and elderly. The Committee is interested in the social and cultural transformation that is taking place as the population ages, and as the workforce ages, and encourages additional research on stereotypes that may hinder or otherwise affect how our society manages the transformation.

NATIONAL INSTITUTE OF ARTHRITIS AND MUSCULOSKELETAL AND SKIN DISEASES

Appropriations, 2007 .....	\$508,240,000
Budget estimate, 2008 .....	508,082,000
Committee recommendation .....	519,810,000

The Committee recommends an appropriation of \$519,810,000 for the National Institute of Arthritis and Musculoskeletal and Skin Diseases [NIAMS]. The fiscal year 2007 appropriation was \$508,240,000 and the budget request is \$508,082,000. The comparable amounts for the budget estimate include funds to be transferred from the Office of AIDS Research.

As explained in the opening section on the NIH, the budget request includes a contribution to the Common Fund equal to 1.3 percent of the Institute's budget. The other amounts above do not include any contribution for the Common Fund.

*Burden of Skin Diseases.*—The Committee continues to urge the NIAMS to expand its research portfolio on skin disease and develop partnerships with the skin disease research community.

*Congenital and Genetic Disease of Bone.*—The Committee understands that the science of genetics has led to a greater understanding of numerous systems that affect bone health, but little of this technology is being applied to bone research. The Committee encourages the NIAMS and NICHD to support research focusing on mechanisms for preventing fractures and improving bone quality and correcting malformations; on innovations in surgical and non-surgical approaches to treatment; on physical factors that affect growth; and on genetic defects that cause bone disease. Furthermore, the Committee urges the NIAMS, NICHD, NIDCR, and NIDDK to expand research on skeletal stem cell biology and the genetics and pathophysiology of rare disorders such as fibrous dysplasia, melihoreostosis, XLinked hypophosphatemic rickets and fibrodysplasia ossificans progressiva.

*Lupus.*—The Committee urges the NIAMS to expand and intensify genetic, clinical, and basic research on lupus, with particular focus on understanding the underlying mechanisms of disease, gene-gene and gene-environmental interactions, epidemiological research, lupus and kidney disease, biomarkers, pediatric research, environmental factors and factors related to the health disparities and comorbidities associated with lupus.

*Lymphatic Research and Lymphatic Diseases.*—The lymphatics are central to the function of bone, muscle, skin and joint tissues. The Committee urges the NIAMS to place a high priority on research in lymphatic biology and disease, with the goal of improving the understanding of inflammatory, autoimmune and fibrotic mechanisms that impact a myriad of diseases and bodily functions.

*Marfan Syndrome.*—The Committee commends the NIAMS for the leading role it has played in advancing basic research on Marfan syndrome. The Committee notes with interest an NHLBI-sponsored clinical trial on the potential benefits of the drug losartan in addressing the cardiovascular manifestations of Marfan syndrome. The Committee encourages the NIAMS to partner with the NHLBI on this research where appropriate, including support for ancillary studies that fall under the mission and jurisdiction of the NIAMS.

*Musculoskeletal Trauma and Skeletal Pain.*—The Committee urges the NIAMS, NIA, NIDCR, and NCCAM to study ways to better understand the epidemiology of back pain and improve existing diagnostic techniques, as well as develop new ones. The Committee also encourages the NIAMS, NIBIB, NICHD, NIDCR, NIDDK and NIA to expand research to improve diagnostic and therapeutic approaches to lower the impact of musculoskeletal traumas, as well as research on accelerated fracture healing—including the use of biochemical or physical bone stimulation, the role of hematopoietic niches to preserve bone stem cells, the use of mesenchymal bone stem cells, and biomaterials and biologicals in bone repair and regeneration—and research into repair of nonunion fractures in osteogenesis imperfecta.

*Paget's Disease.*—The Committee urges the NIAMS to continue to study the prevalence, cause, and treatment of Paget's disease.

*Psoriasis.*—The Committee strongly urges the NIAMS to expand genetic, clinical, and basic research related to the understanding of the cellular and molecular mechanisms of psoriasis and psoriatic arthritis research. Moreover, additional attention is needed to conclusively identify the major psoriasis gene as well as others that contribute to psoriasis and/or psoriatic arthritis genetic susceptibility. The Committee is concerned about recent studies illustrating an elevated risk for certain chronic diseases, such as heart attack and diabetes, among individuals with psoriasis, and therefore urges the NIAMS to examine the relationship between co-morbidities and psoriasis, including shared molecular pathways. Further, the Committee encourages the NIAMS to undertake studies to understand individual response to particular therapies for psoriasis and psoriatic arthritis, determine if psoriatic arthritis can be prevented in those who are at risk, and examine joint inflammation and the associated damage caused by psoriatic arthritis.

*Tuberous Sclerosis Complex [TSC].*—The Committee urges the NIAMS to support clinical trials that specifically target skin manifestations of TSC (facial angiofibromas, hypomelanotic macules, Shagreen patches, etc.). The Committee also urges the NIAMS to support basic research on the mTOR signaling pathway and the role of the TSC1/2 genes in skin and muscle cells.

NATIONAL INSTITUTE ON DEAFNESS AND OTHER COMMUNICATION  
DISORDERS

Appropriations, 2007 .....	\$393,668,000
Budget estimate, 2008 .....	393,682,000
Committee recommendation .....	402,680,000

The Committee recommends an appropriation of \$402,680,000 for the National Institute on Deafness and Other Communication Disorders [NIDCD]. The budget request is \$393,682,000 and the fiscal year 2007 appropriation was \$393,668,000. The comparable amounts for the budget estimate include funds to be transferred from the Office of AIDS Research.

As explained in the opening section on the NIH, the budget request includes a contribution to the Common Fund equal to 1.3 percent of the Institute's budget. The other amounts above do not include any contribution for the Common Fund.

*Animal Models of Plasticity.*—The Committee emphasizes the importance of research into the brain's response to and changes due to stimulation by sound or electricity, as hearing loss will increasingly be ameliorated through advanced restorative technologies such as amplification devices and cochlear prostheses. Focus should be on how hearing loss changes the central nervous system, with studies at the level of synaptic connections through studies of perceptual learning. These should include studies of neural coding, neural network function, and "critical periods" during life when central auditory processing is affected. The Committee also encourages the use of new methodologies, including computational models, emerging optical tools and new anatomical methods and models.

*Early Detection and Intervention.*—The Committee continues to support expanded research on early detection, diagnosis and optimal intervention strategies for infants identified at birth with hear-

ing loss and other communication disorders. The Committee urges the NIDCD to accelerate efforts to define the role of congenital exposure to cytomegalovirus in progressive hearing loss in childhood and foster research to identify novel effective intervention strategies to prevent otitis media and lessen dependence on antibiotic therapies.

*Environmentally Induced Hearing Loss.*—The Committee remains concerned by the number of Americans who suffer from chemical and noise-induced hearing loss. It strongly supports informing the public of the risks to the auditory system from excessive noise, with special emphasis on young individuals. Therefore, the expansion of NIDCD's Wise Ears! Campaign is greatly encouraged.

*Funding Strategies.*—The Committee suggests that the NIDCD consider novel funding formats such as multi-year project periods, with the first several years devoted to technology development and the second several years devoted to implementation of the technology. The Committee also encourages the NIDCD to consider funding collaborations with foundations and/or other non-government funders of deafness-related research.

*Hearing Devices.*—Recognizing that more people are receiving cochlear implants, the Committee recommends tissue engineering research to improve their efficacy and, for recipients of two implants, research to improve spatial hearing. The Committee also encourages the NIDCD to support research building on developments in brain stem prostheses.

*Hereditary Hearing Loss.*—The Committee urges the NIDCD to continue to support molecular and cellular research to identify the structure, regulation and function of genes whose mutation results in human communication disorders. In addition, acknowledging the progress of the HapMap Project, the Committee encourages the NIDCD to consider large-scale screening of patients with hearing and other communication disorders to determine the loci of mutant genes relevant to susceptibility to manifestation of various outcomes.

*Inner Ear Hair Cell Regeneration.*—The Committee applauds past support of regenerative studies and urges the NIDCD to continue to give a high priority to biological molecular and genetic research aimed at preventing the loss of hair cells and replacing lost and dying inner ear hair cells and other cells compromised by aging, drugs, noise and genetic conditions. The Committee encourages the NIDCD to build on animal studies demonstrating the possibility of regenerating lost sensory cells and the potential use of stem cells or endogenous precursors to replace lost sensory cells or auditory nerve cells.

*Mouse Models.*—The Committee recommends developing new mouse genetic models for in vivo studies of hair cell development, regeneration and damage/protection, including models of hair cell damage not caused by aminoglycosides.

*Neurofibromatosis.*—NF2 accounts for approximately 5 percent of genetic forms of deafness. The Committee therefore encourages the NIDCD to expand its NF2 research portfolio.

*Presbycusis.*—Presbycusis, the gradual loss of hearing from aging, is the most prevalent type of hearing loss and the third lead-

ing chronic disease in people over 65. The Committee encourages continuing studies of the declining stria vascularis metabolism, as well as investigations of the central mechanisms of presbycusis.

*Tinnitus.*—The Committee recommends that the NIDCD expand its research into causal mechanisms underlying peripheral and central tinnitus and pursue research to develop therapies for treatment. In 2005, the NIDCD held a workshop to explore areas of needed research for the treatment and cure of tinnitus. The Committee urges the Institute to devote additional resources to follow up on the workshop’s recommendations, including increasing collaboration with the Department of Defense and the Veterans Administration to support a multi-disciplinary research approach that promotes accurate diagnosis and treatment to cure tinnitus.

*Translational Research.*—The Committee applauds the NIDCD’s establishment of a Translational Research Branch and urges the continuation of research activities and clinical trials that can be used in treatments of communication disorders.

NATIONAL INSTITUTE OF NURSING RESEARCH

Appropriations, 2007 .....	\$137,404,000
Budget estimate, 2008 .....	137,800,000
Committee recommendation .....	140,456,000

The Committee recommends an appropriation of \$140,456,000 for the National Institute of Nursing Research [NINR]. The budget request is \$137,800,000 and the fiscal year 2007 appropriation was \$137,404,000. The comparable amounts for the budget estimate include funds to be transferred from the Office of AIDS Research.

As explained in the opening section on the NIH, the budget request includes a contribution to the Common Fund equal to 1.3 percent of the Institute’s budget. The other amounts above do not include any contribution for the Common Fund.

*Nurse-Family Partnership Program.*—The Committee urges the NINR to expand Nurse-Family Partnership Programs affiliated with nurse-managed health centers and involve advanced practice nurses in research and demonstration projects.

*Nursing Shortage.*—The nursing shortage has an adverse effect on the health care delivery system as well as the health of our Nation’s citizens. A shortage of nurse faculty caused schools of nursing to turn away thousands of qualified students last year. The NINR confronts this issue by directing 8 percent of its budget to research training to help develop the pool of nurse researchers who also become faculty. Training support for fast-track baccalaureate-to-doctoral program participants is one important initiative. The 17 recently funded Nursing Partnership Centers to Reduce Health Disparities is another initiative that helps produce an adequate number of nurse researchers. The Committee encourages these ongoing efforts. The Committee also encourages the NINR to facilitate research projects located in rural areas that serve minority nursing students through community colleges.

NATIONAL INSTITUTE ON ALCOHOL ABUSE AND ALCOHOLISM

Appropriations, 2007 .....	\$436,259,000
Budget estimate, 2008 .....	436,505,000
Committee recommendation .....	445,702,000

The Committee recommends an appropriation of \$445,702,000 for the National Institute on Alcohol Abuse and Alcoholism [NIAAA]. The budget request is \$436,505,000 and the fiscal year 2007 appropriation was \$436,259,000. The comparable amounts for the budget estimate include funds to be transferred from the Office of AIDS Research.

As explained in the opening section on the NIH, the budget request includes a contribution to the Common Fund equal to 1.3 percent of the Institute's budget. The other amounts above do not include any contribution for the Common Fund.

*Alaska Natives.*—The Committee is aware of serious problems with alcohol and substance abuse among Alaska Natives and of the need for translating research into clinical applications for this population. The Committee urges the NIAAA to sponsor a research-to-practice forum with SAMHSA and other experts to focus on bridging the gap between researchers and practitioners and translating scientific research into clinical applications.

*Clinician's Guide.*—The Committee commends the NIAAA for widely disseminating its publication "Helping Patients Who Drink Too Much: A Clinician's Guide." The Committee encourages the NIAAA to further develop guide materials, including information for clinicians about how to best use the guide, and short pamphlets that are targeted toward special subpopulations, and to work with professional organizations, SAMHSA, and other international organizations to further disseminate this important resource. The Committee also encourages the NIAAA to develop supporting training materials for physicians and other health care providers.

*Collaboration with Single State Authorities [SSAs].*—The Committee urges the NIAAA to work with State substance abuse agencies, also known as Single State Authorities [SSAs], on collaborative initiatives to ensure that research findings are relevant and adaptable by publicly funded State substance abuse systems.

*Environmental Effects Underlying Alcoholism.*—The Committee encourages the NIAAA to continue to fund research to determine the role of the environment and environmental factors in producing lasting and potentially life-altering changes in gene expression and gene function that contributes to the development of alcohol abuse and addiction with the ultimate goal of developing new medication for the treatment of alcohol use disorders.

*Hepatitis Prevention.*—The Committee urges the NIAAA to work with voluntary health organizations to promote liver wellness, education, and primary prevention of both hepatitis and substance abuse.

*Mechanisms of Behavior Change.*—The Committee commends the NIAAA for launching an interdisciplinary initiative aimed at understanding the social, behavioral and psychological factors in discontinuing harmful drinking by young adults.

*Patterns of Alcohol Consumption.*—The Committee encourages the NIAAA's efforts to include measurement of quantity and frequency of alcohol consumption in new classification systems of alcohol problems. The Committee also encourages the NIAAA to continue to fund research that defines both safe and hazardous levels of alcohol consumption for various segments of the population.

*Underage Drinking.*—The Committee notes that the Surgeon General calls for measures to decrease the availability of alcohol to youth. The Committee urges the NIAAA to conduct further research on the most effective means of reducing youth access to alcohol and increasing the cost of obtaining it.

*Understanding the Processes of Change in Drinking Behavior.*—The Committee understands that a number of distinct treatment approaches have been developed to address alcohol use disorders. While each approach is useful in reducing alcohol consumption, research suggests that these approaches have similar levels of effectiveness. Recent research has also demonstrated that many individuals transition out of alcohol dependence without professional treatment, while others drink heavily but never develop complications required for a diagnosis of dependence. The Committee applauds recent NIAAA research initiatives supporting mechanisms of behavioral change using professional treatment mechanisms. The Committee encourages the NIAAA to further expand research in this area by stimulating interdisciplinary research that integrates biomedical, psychological and social science perspectives on mechanisms of behavior change.

NATIONAL INSTITUTE ON DRUG ABUSE

Appropriations, 2007 .....	\$1,000,621,000
Budget estimate, 2008 .....	1,000,365,000
Committee recommendation .....	1,022,594,000

The Committee recommends an appropriation of \$1,022,594,000 for the National Institute on Drug Abuse [NIDA]. The budget request is \$1,000,365,000 and the fiscal year 2007 appropriation was \$1,000,621,000. The comparable numbers for the budget estimate include funds to be transferred from the Office of AIDS Research.

As explained in the opening section on the NIH, the budget request includes a contribution to the Common Fund equal to 1.3 percent of the Institute’s budget. The other amounts above do not include any contribution for the Common Fund.

*Adolescent Brain Development.*—The Committee encourages NIDA to continue its emphasis on adolescent brain development to better understand how developmental processes and outcomes are affected by drug exposure, the environment and genetics.

*Blending Research and Practice.*—The Committee notes that it takes far too long for clinical research results to be implemented as part of routine patient care, and that this lag in diffusion of innovation is costly for society, devastating for individuals and families, and wasteful of knowledge and investments made to improve the health and quality of people’s lives. The Committee applauds NIDA’s collaborative approach aimed at involving all entities invested in changing the system and making it work better.

*Brain Imaging.*—The Committee applauds the Institute’s efforts to find new and important uses for brain imaging technologies—such as through the new RFA titled “Brain Imaging Drug Use Prevention Messages”—and urges the Institute to continue work in this area.

*Centers of Excellence for Physician Information.*—The Committee is pleased that NIDA has created Centers of Excellence for Physician Information, and understands that these centers will serve as

national models to support the advancement of addiction awareness, prevention, and treatment in primary care practices.

*Clinical Trials Network.*—The Committee is pleased with the continued success and progress of NIDA's National Drug Abuse Treatment Clinical Trials Network, which provides an infrastructure to test the effectiveness of new and improved interventions in real-life community settings with diverse populations.

*Collaboration with Single State Authorities [SSAs].*—The Committee commends NIDA for its outreach and work with SAMHSA's Center for Substance Abuse Treatment and State substance abuse directors, also known as Single State Authorities [SSAs], to reduce the lag between the discovery of an effective treatment intervention and its availability at the community level.

*Co-occurring Disorders.*—The Committee encourages NIDA to continue to work with other agencies to stimulate new research to develop effective strategies and to ensure the timely adoption and implementation of evidence-based practices for the prevention and treatment of co-occurring disorders.

*Criminal Justice Population.*—The Committee commends NIDA for the success of its Criminal Justice Drug Abuse Treatment Studies program. By providing evidence-based training to judges about the neurological and behavioral underpinnings of substance abuse and treatment, this program helps ensure that addicted offenders will receive appropriate treatment. The Committee encourages NIDA to continue its support of behavioral research that can further our understanding about the underlying cognitive, emotional, and behavioral factors that lead to drug abuse relapses in prisons and how to prevent them.

*Disseminating Addiction Research Information to the General Public.*—The Committee congratulates NIDA for its collaboration with HBO and other partners on the production of the groundbreaking documentary film, "Addiction." This film details the latest scientific knowledge on addiction and presents it in a compelling way to help the lay public understand addiction as a brain disease that can be successfully treated.

*Drug Abuse and HIV/AIDS.*—The Committee understands that drug abuse and addiction continue to fuel the spread of HIV/AIDS, and that drug abuse prevention and treatment interventions can be very effective in reducing HIV risk. Research should continue to examine every aspect of HIV/AIDS, drug abuse, and addiction, including risk behaviors associated with both injection and non-injection drug abuse; how drugs of abuse alter brain function and impair decision making; and HIV prevention and treatment strategies for diverse groups. The Committee also applauds the Institute for holding a spring 2007 conference titled "Drug Abuse and Risky Behaviors: The Evolving Dynamics of HIV/AIDS."

*Emerging Drug Problems.*—The Committee is pleased with NIDA's efforts to monitor drug use trends and to rapidly inform the public of emerging drug problems.

*Genes, Environment, and Development.*—The Committee recognizes and commends NIDA for its leadership role in launching the Genes, Environment, and Development Initiative [GEDI] with the NCI. This initiative will add to the understanding of the contribution of genetic, environmental and developmental factors to the eti-

ology of substance abuse and related phenotypes, and could lead to improved and tailored drug abuse and addiction prevention and treatment interventions.

*Health Disparities.*—The Committee notes that the consequences of drug abuse disproportionately impact minorities, especially African American populations. The Committee encourages NIDA to conduct more studies in these populations, especially in criminal justice settings and geographic areas where HIV/AIDS rates are high.

*Hepatitis Prevention.*—The Committee urges NIDA to work with voluntary health organizations to promote liver wellness, education, and primary prevention of both hepatitis and substance abuse.

*Inhalant Abuse.*—The Committee urges the Institute to continue its support of research on prevention and treatment of inhalant abuse, and to enhance public awareness on this issue.

*Marijuana Use.*—The Committee urges NIDA to continue to support research on the long-term consequences of marijuana use and work with the private sector to develop medications focusing on marijuana addiction.

*Methamphetamine Abuse.*—The Committee urges NIDA to continue supporting research to address the medical consequences of methamphetamine abuse.

*Pain Medications and Addiction.*—The Committee commends NIDA for taking a leadership role in addressing issues around pain medications and addiction. The prevalence of, and process of how to prevent, reduce, and treat, negative health consequences such as intoxication and physical dependence are not well understood. The Committee is pleased that NIDA brought a focus to this important issue, in collaboration with the American Medical Association and in conjunction with the NIH Pain Consortium, via its spring 2007 conference “Pain, Opioids, and Addiction: An Urgent Problem for Doctors and Patients.” Research in this area should continue to be a priority, through such efforts as the Prescription Opioid Use and Abuse in the Treatment of Pain initiative. The Committee applauds NIDA for continuing to work with private industry to develop anti-addiction medications.

*Primary Care Settings and Youth.*—The Committee encourages NIDA to continue to support health services research on effective ways to educate primary care providers about drug abuse, develop brief behavioral interventions for preventing and treating drug use and related health problems; and develop methods to integrate drug abuse screening, assessment, prevention and treatment into primary health care settings.

*Social Neuroscience.*—The Committee encourages the Institute to continue its focus on the interplay between genes, environment, and social factors and their relevance to drug abuse and addiction. In particular, the Committee applauds NIDA’s involvement in last year’s “social neuroscience” request for applications and this year’s “genes, environment, and development initiative” request for applications.

*Support for Young Investigators.*—The Committee congratulates NIDA for its focus on supporting young investigators, especially in the area of clinical research.

## NATIONAL INSTITUTE OF MENTAL HEALTH

Appropriations, 2007 .....	\$1,404,494,000
Budget estimate, 2008 .....	1,405,421,000
Committee recommendation .....	1,436,001,000

The Committee recommends an appropriation of \$1,436,001,000 for the National Institute of Mental Health [NIMH]. The budget request is \$1,405,421,000 and the fiscal year 2007 appropriation was \$1,404,494,000. The comparable amounts for the budget estimate include funds to be transferred from the Office of AIDS Research.

As explained in the opening section on the NIH, the budget request includes a contribution to the Common Fund equal to 1.3 percent of the Institute's budget. The other amounts above do not include any contribution for the Common Fund.

*Alzheimer's Disease.*—The NIMH plays a vital role in efforts to develop new treatment strategies for Alzheimer's disease, from basic neuroscience studies to treatment and services research. For example, the Institute is supporting a large practical clinical trial examining the effectiveness of antipsychotic medications for treating agitation and other behavioral disturbances in Alzheimer patients. The Committee encourages the NIMH to continue to advance understanding of Alzheimer's disease.

*Basic Behavioral Science.*—The Committee urges the NIMH to put a higher priority on the study of basic behavioral functions such as cognition, emotion, decision-making, and motivation, and to maintain its support for research on the promotion of mental health and the study of basic psychological factors that influence behavior.

*Clinical Research.*—The Committee applauds NIMH's continued commitment to the goals of the NIH Roadmap Initiative on re-engineering the clinical research enterprise through the new clinical trials networks on bipolar disorder, depression, and schizophrenia. The Committee strongly supports these efforts and urges the NIMH to examine treatments of mental disorders across the lifespan, with particular attention paid to aging populations and youth, and to the effects of psychopharmacological treatments on cognition, emotional development, and other co-morbid conditions. The Committee further urges the NIMH to examine cultural factors, such as stigma, that influence the diagnosis and treatment of mental disorders.

*Down Syndrome.*—The Committee encourages the NIMH to develop new strategies for cataloging, understanding, diagnosing and treating behavioral disorders that are common in people with Down syndrome. They include autism, pervasive developmental disorder, obsessive compulsive disorder, depression and psychosis. The Committee urges the NIMH to coordinate its research on Down syndrome with the NICHD, NINDS, NIA and other Institutes.

*Epilepsy.*—The connections between epilepsy and depression as well as the cognitive burden of epilepsy are of particular importance to the Committee. The Committee strongly urges the Institute to coordinate research into this area with the NINDS and to intensify efforts at understanding the etiology and treatment of co-morbid mental and neurological disorders.

*Fragile X.*—The Committee urges the NIMH to enhance its Fragile X translational research efforts that were identified during focused meetings from November 2001 through July 2004. These include controlled studies of existing and new pharmacological treatments for Fragile X and identification of the key molecular targets that are likely candidates for designing drug treatments for Fragile X and related disorders such as autism. The Committee also urges the NIMH to include Fragile X in its studies of related neuropsychiatric disorders and to work with other Institutes such as the NICHD and NINDS to develop cooperative research support mechanisms in this area. In addition, the Committee encourages the NIMH participate in the scientific session described under the section on the NICHD.

*Frontier Mental Health Needs.*—The Committee commends the NIMH on its outreach efforts to determine the unique mental health needs that may exist in remote frontier communities, including Alaska. The Committee encourages the NIMH to expand its research efforts into these communities, which are often ignored in research projects but continue to suffer from high incidences of mental health problems including depression, suicide and co-occurring disorders with substance abuse.

*Immigrant Health.*—The Committee recognizes that immigrants to the United States experience unique stresses, prejudice, and poverty and can be considered at-risk subpopulations for health, emotional and behavioral problems as well as, in the case of children, learning and academic difficulties. The effects of immigration on the psychological and social well-being are especially profound for certain populations, including children, women, individuals with disabilities, and those with limited financial resources. To address this, the Committee urges the NIMH to partner with other Institutes to boost research on the adaptation, development, health, and mental health needs of diverse immigrant children, youth, and families.

*Older Adults.*—The Committee urges the NIMH to place a stronger emphasis on research on adults over age 65 to reflect the growth in numbers of this population. The Committee requests that the Institute provide data in the fiscal year 2009 congressional budget justifications on the amount of NIMH funding directed toward geriatric mental health research over the past 5 years.

*Social Neuroscience.*—The Committee is pleased that the emerging field of social neuroscience is among NIMH's priorities. The Committee recognizes that research into the biological mechanisms underlying social behaviors related to mental health has great potential in efforts to understand and treat mental disorders such as autism and schizophrenia.

*Suicide Prevention.*—The Committee is pleased that the NIMH is supporting two developing centers for interventions to prevent suicide. The Committee encourages the NIMH to increase its investment in suicide prevention research by supporting advanced centers for this purpose and creating new developing centers.

## NATIONAL HUMAN GENOME RESEARCH INSTITUTE

Appropriations, 2007 .....	\$486,491,000
Budget estimate, 2008 .....	484,436,000
Committee recommendation .....	497,031,000

The Committee recommendation includes \$497,031,000 for the National Human Genome Research Institute [NHGRI]. The budget request is \$484,436,000 and the fiscal year 2007 appropriation was \$486,491,000. The comparable amounts for the budget estimate include funds to be transferred from the Office of AIDS Research.

As explained in the opening section on the NIH, the budget request includes a contribution to the Common Fund equal to 1.3 percent of the Institute's budget. The other amounts above do not include any contribution for the Common Fund.

*Fragile X*.—FMRP, the protein whose absence results in Fragile X syndrome, is a regulator of translation of many genes including those involved in learning and memory. A genomic approach to understanding the diverse pathways regulated by FMRP would enhance the understanding of human cognition and identify potential targets for drug design to alleviate the symptoms of Fragile X and related disorders. The Committee urges the NHGRI to consider expanding its research activities on Fragile X and to coordinate these efforts with other Institutes working on related activities.

*Spinal Muscular Atrophy [SMA]*.—The Committee supports the development of a pan-ethnic carrier screening program for SMA and commends the NHGRI and NICHD for their plans to jointly convene a workshop in early 2008 to stimulate carrier screening technology development, enhance education and awareness among professional and patient communities, and promote policy discussions regarding the ethical and social issues related to implementing new carrier screening programs for disorders such as SMA. The Committee requests an update on the workshop in the fiscal year 2009 congressional budget justifications. Furthermore, the Committee urges the NHGRI to work collaboratively and cooperatively with the advocacy community in this effort.

*Tuberous Sclerosis Complex [TSC]*.—The Committee urges the NHGRI to provide assistance and advice to the TSC research community on TSC gene and genome-wide sequencing projects.

## NATIONAL INSTITUTE OF BIOMEDICAL IMAGING AND BIOENGINEERING

Appropriations, 2007 .....	\$296,887,000
Budget estimate, 2008 .....	300,463,000
Committee recommendation .....	304,319,000

The Committee recommends an appropriation of \$304,319,000 for the National Institute of Biomedical Imaging and Bioengineering [NIBIB]. The budget request is \$300,463,000 and the fiscal year 2007 appropriation was \$296,887,000. The comparable amounts for the budget estimate include funds to be transferred from the Office of AIDS Research.

As explained in the opening section on the NIH, the budget request includes a contribution to the Common Fund equal to 1.3 percent of the Institute's budget. The other amounts above do not include any contribution for the Common Fund.

*Artificial Pancreas.*—A fully automated pancreas that responds rapidly to changes in diet, physical activity, and metabolic status has the potential to improve daily glucose control and dramatically reduce the risk of long-term diabetic complications. The NIBIB is urged to foster research on algorithms that can replicate normal glucose control and accurately close the loop between glucose monitoring and insulin treatment.

*Imaging Beta Cells.*—The ability to painlessly and non-invasively visualize pancreatic islets in people with type 1 diabetes has the potential to revolutionize diagnosis and therapy of type 1 diabetes. The Committee recognizes the NIBIB, along with the NIA, NIAID, and NIDDK, for their collaborative efforts to promote research on the development of new islet imaging technologies. The Committee encourages the NIBIB and NIDDK to support translational research efforts to convert advances made in imaging of islets in animal models into technologies that can be applied to human type 1 diabetes patients.

*Positron emission tomography [PET].*—The Committee continues to encourage the NIBIB to devote significant resources to molecular imaging technologies such as PET and microPET to take advantage of the capacities of molecular imaging to detect disease process at the molecular level and to monitor the effectiveness of targeted gene therapies now under development. The Committee also encourages the NIBIB to collaborate with other, disease-specific Institutes at NIH, so that new imaging technologies are closely tied to the research projects being undertaken throughout the NIH.

#### NATIONAL CENTER FOR RESEARCH RESOURCES

Appropriations, 2007 .....	\$1,133,240,000
Budget estimate, 2008 .....	1,112,498,000
Committee recommendation .....	1,177,997,000

The Committee recommends an appropriation of \$1,177,997,000 for the National Center for Research Resources [NCRR]. The budget request is \$1,112,498,000 and the fiscal year 2007 appropriation was \$1,133,240,000. The comparable amounts for the budget estimate include funds to be transferred from the Office of AIDS Research.

As explained in the opening section on the NIH, the budget request includes a contribution to the Common Fund equal to 1.3 percent of the Center's budget. The other amounts above do not include any contribution for the Common Fund.

*Clinical and Translational Science Awards [CTSAs].*—The Committee strongly endorses the CTSA initiative and urges the NCR to adhere to its goal of supporting 60 CTSAs by 2012. In doing so, the Committee urges the NCR to maintain or strengthen the clinical research infrastructure component currently provided by the longstanding General Clinical Research Centers [GCRC] program. The Committee requests an update on these activities in the fiscal year 2009 congressional budget justifications.

*Imaging.*—The Committee applauds the NCR for its development and support of a national Image Guided Therapy [IGT] Center for research, training, and services related to novel imaging tools for disease diagnosis and therapy. The NCR is encouraged to work with the NIDDK and NIBIB to ensure that this unique re-

source center engages with the diabetes research community to accelerate the development of new methods for the non-invasive imaging of pancreatic islets for applications in Type 1 diabetes research and treatment.

*Institutional Development Awards [IDeA].*—The Committee has provided \$223,607,000, for the IDeA program authorized by section 402(g) of the Public Health Service Act. The fiscal year 2007 funding level was \$218,153,000. The Committee recognizes the importance of the Centers of Biomedical Research Excellence and the IDeA Networks of Biomedical Research Excellence programs in improving the infrastructure and strengthening the biomedical research capacity and capability of research institutions within the IDeA States.

*Islet Cell Resource Centers.*—The Committee applauds the NCRP for renewal of the Islet Cell Resource Centers [ICRs] program, a vital resource for the isolation and distribution of clinical grade human islets for transplantation and basic diabetes research.

*Positron Emission Tomography [PET].*—The Committee continues to urge the NCRP to support research resource centers for the development and refinement of PET as a unique imaging technology to diagnose and stage diseases of the brain, including Alzheimer's disease.

*Rare Disease Initiative.*—The Committee understands that obtaining adequate human biospecimen tissues and clinical data for research for many of the more than 7,000 rare diseases known today has been a major barrier to adequately expanding research aimed ultimately to treat and cure these rare diseases. The Committee, therefore, encourages the NCRP and the Office of Rare Diseases to expand their emphasis on rare diseases human tissue/biospecimen procurement and storage activities for rare diseases research.

*Research Centers at Minority Institutions.*—The Committee continues to recognize the critical role played by minority institutions at both the graduate and undergraduate level in addressing the health research and training needs of minority populations. The Committee encourages the NIH to strengthen participation from minority institutions and increase resources available in this area. The Committee recommends that the NCRP direct supplemental funds to high-impact, high-risk research activities within the RCMI program such as creating an integrated translational research network to help reduce health disparities.

NATIONAL CENTER FOR COMPLEMENTARY AND ALTERNATIVE  
MEDICINE

Appropriations, 2007 .....	\$121,576,000
Budget estimate, 2008 .....	121,699,000
Committee recommendation .....	124,213,000

The Committee has included \$124,213,000 for the National Center for Complementary and Alternative Medicine. The budget request is \$121,699,000 and the fiscal year 2007 appropriation was \$121,576,000. The comparable amounts for the budget estimate include funds to be transferred from the Office of AIDS Research.

As explained in the opening section on the NIH, the budget request includes a contribution to the Common Fund equal to 1.3

percent of the Center's budget. The other amounts above do not include any contribution for the Common Fund.

*Improving Liver Disease Outcomes.*—The Committee is pleased with the progress made in studying the benefit of active ingredients in milk thistle and SAM-e, a naturally occurring compound in ameliorating and improving the outcome of individuals with non-alcoholic steatohepatitis [NASH]. As NASH-related liver disease has become an important indicator for liver transplantation, in the absence of better interventions, the need for NASH-related liver transplantation will increase significantly over time.

*Portfolio Balance.*—The Committee endorses the goal articulated in NCCAM's 2005–2009 strategic plan to put a greater emphasis on basic research and preclinical studies before engaging in costly clinical trials.

#### NATIONAL CENTER ON MINORITY HEALTH AND HEALTH DISPARITIES

Appropriations, 2007 .....	\$199,444,000
Budget estimate, 2008 .....	194,495,000
Committee recommendation .....	203,895,000

The Committee has included \$203,895,000 for the National Center on Minority Health and Health Disparities. The budget request is \$194,495,000 and the fiscal year 2007 appropriation was \$199,444,000. The comparable amounts for the budget estimate include funds to be transferred from the Office of AIDS Research.

As explained in the opening section on the NIH, the budget request includes a contribution to the Common Fund equal to 1.3 percent of the Center's budget. The other amounts above do not include any contribution for the Common Fund.

*Ethnic Minorities and Research.*—The Committee encourages the NIH to invest in training programs that seek to prepare ethnic minorities and others for research and services careers that address the needs of the Nation's racial and ethnic diverse populations and to ensure, whenever feasible, that psychology is recognized as an eligible discipline for funding applications for such training programs.

*Glomerular Disease.*—The Committee understands that glomerular disease, a group of diseases affecting the filtering mechanisms of the kidneys, is more prevalent among African Americans than the general population. The Committee urges the NCMHD to explore collaboration with the NIDDK to support research activities related to glomerular injury.

*Lupus.*—Lupus is two to three times more common among African American, Hispanic, Asian American and Native American women than Caucasian women—a health disparity that remains unexplained. Moreover, lupus mortality has increased over the past three decades and is higher among older African-American women. The Committee urges the NCMHD to prioritize lupus research with a particular focus on exploring the associated health disparities and co-morbidities such as heart disease, depression, and renal disease.

*Project EXPORT.*—The Committee commends the NCMHD for its successful "Project EXPORT" initiative and urges continued support for this program.

*Research Endowments.*—The Committee commends the NCMHD for its leadership in addressing the longstanding problem of health status disparities in minority and medically underserved populations. The Committee continues to encourage the NCMHD to implement its research endowment program in a manner that is consistent with the authorizing legislation.

JOHN E. FOGARTY INTERNATIONAL CENTER FOR ADVANCED STUDY IN  
THE HEALTH SCIENCES

Appropriations, 2007 .....	\$66,446,000
Budget estimate, 2008 .....	66,594,000
Committee recommendation .....	68,000,000

The Committee recommends an appropriation of \$68,000,000 for the Fogarty International Center [FIC]. The budget request is \$66,594,000 and the fiscal year 2007 appropriation was \$66,446,000. The comparable amounts for the budget estimate include funds to be transferred from the Office of AIDS Research.

As explained in the opening section on the NIH, the budget request includes a contribution to the Common Fund equal to 1.3 percent of the Center's budget. The other amounts above do not include any contribution for the Common Fund.

*Chronic Obstructive Pulmonary Disease [COPD].*—The Committee notes that COPD is the fourth leading cause of death worldwide, and encourages the Fogarty International Center to expand its COPD research and training activities.

*Global Health Challenges.*—The Committee commends the Center for the success of its programs to strengthen science and public health research institutions in low-income countries, specifically in malaria, TB, and neglected tropical diseases. The Committee urges the FIC to continue supporting research training, focused in these areas, to enable developing country scientists to develop effective, evidence-based strategies to prevent, treat, and diagnose these debilitating diseases. While major investments in biomedical research are resulting in new tools and medical advances, the Committee is concerned that improvements in health outcomes will be delayed without local scientific expertise to translate research findings into practice. The Committee urges the FIC to promote applied health research in developing countries to speed the implementation of new health interventions for malaria, TB, and neglected tropical diseases.

*Training Programs.*—The Committee is pleased with the FIC's leadership in training American researchers in global health research through its International Clinical Research Scholars Program and the International Research Scientist Development Award Program. The Committee encourages the expansion of the FIC's training programs that support junior U.S. scientists. The Committee is also pleased with the Center's efforts to supplement grants in AIDS International Training and Research Program [AITRP] or International Training and Research Program in Emerging Infectious Diseases [ERID], which trains tuberculosis experts in the developing world. The Committee encourages the FIC to support activities, such as the Pan-African Thoracic Society's Methods in Epidemiologic, Clinical and Operations Research [MECOR] program, to expand training opportunities for physicians in Africa.

## NATIONAL LIBRARY OF MEDICINE

Appropriations, 2007 .....	\$329,050,000
Budget estimate, 2008 .....	320,762,000
Committee recommendation .....	336,017,000

The Committee recommends an appropriation of \$336,017,000 for the National Library of Medicine [NLM]. The budget request is \$320,762,000 and the fiscal year 2007 appropriation was \$329,050,000. These amounts include \$8,200,000 made available from program evaluation funds. The comparable amounts for the budget estimate include funds to be transferred from the Office of AIDS Research.

As explained in the opening section on the NIH, the budget request includes a contribution to the Common Fund equal to 1.3 percent of the NLM's budget. The other amounts above do not include any contribution for the Common Fund.

*Communication of Research Findings.*—One of the fundamental charges to the NIH is to facilitate the translation of research findings into practice. In this regard, the Committee is pleased that the NLM has helped to launch NIH MedlinePlus magazine, which provides consumers and health professionals authoritative health information based on the latest NIH-supported research in a user-friendly format. The Committee strongly urges the NLM to substantially expand the distribution of this new publication.

*Disease Management Technology.*—The Committee urges the NLM to conduct outreach activities to all public and private sector organizations which have demonstrated capabilities in health information technology.

*Native Hawaiian Healthcare Resources.*—The Committee urges the NLM to work with Native Hawaiian organizations to increase access to health information and health resources for Native Hawaiians.

*Registry of Liver Toxicities.*—The Committee applauds the NLM's plan to create an accessible, online registry of the liver toxicity of medications and sees this as an important step to help physicians and patients avoid the devastating consequences of liver failure. The registry will include information regarding the liver toxicity of more than 400 drugs. The Committee urges the inclusion in the registry of databases that develop information on the interrelationship between environmental toxins and genes.

## OFFICE OF THE DIRECTOR

Appropriations, 2007 .....	\$1,046,901,000
Budget estimate, 2008 .....	517,062,000
Committee recommendation .....	1,145,790,000

The Committee recommends an appropriation of \$1,145,790,000 for the Office of the Director [OD]. The budget request is \$517,062,000 and the fiscal year 2007 appropriation was \$1,046,901,000. The comparable amounts for the budget estimate include funds to be transferred from the Office of AIDS Research.

The Committee has included bill language specifying the amount for the Common Fund as \$531,300,000. The comparable amount for fiscal year 2007 was \$483,000,000, and the comparable amount for the budget request is \$486,153,000. The discrepancy between the

latter amount and the amount on the funding table is explained at the beginning of the section on the NIH.

The Committee includes bill language providing up to \$500,000 for the Foundation for the NIH.

*Office of Behavioral and Social Sciences Research*

*Basic Behavioral Research.*—The Committee is aware that basic behavioral research focused on such areas as cognition, perception, emotion, social interaction, and learning have led to important advances and improved treatments for depression, bipolar and other affective disorders, diabetes, compliance on behavior change related to diabetes, heart disease, cancer, obesity, and more effective public health announcements and interventions. In view of the fact that 8 out of the 10 leading causes of death have a significant behavioral component and that basic research is the underpinning of advances in behavioral research, the Committee is concerned by the continued lack of focus of scientific leadership at NIH for this important field of science. It is therefore requested that the Director submit a report to the Committee by December 1, 2007, indicating the scientific leadership structure for this field within the appropriate grant-making Institute.

*Gene-Environment Interactions and Health.*—The Committee encourages the OBSSR to work with other Institutes and Centers to spur progress on understanding the interactions among genetic and environmental factors, especially regarding how they might contribute to health disparities in minority populations.

*Office of Rare Diseases*

*CETT Program.*—The Collaborative, Education and Test Translation [CETT] Program promotes the translation of rare disease genetic tests from research to clinical laboratories. The Committee believes that this program can be enhanced by using microarray technology in the development of new tests and by close collaboration with and support from those Institutes whose research agendas already relate to specific rare diseases. The Director is urged to assure such trans-institute collaborations are aggressively fostered.

*Office of Research on Women's Health*

*Chronic Fatigue Syndrome [CFS].*—The Committee commends the Office of Research on Women's Health for its leadership on CFS research, particularly the coordination of the request for applications that culminated in the October 2006 announcement of seven new awards for in this area. The Committee recognizes the opportunity created by the requirement that the investigators funded under this initiative meet annually and encourages the NIH to use this meeting to stimulate new research initiatives and build multi-center collaborations. The Committee again urges the NIH to develop an intramural CFS research program and to implement the recommendation made by the CFS Advisory Committee to "establish five Centers of Excellence within the United States that would effectively utilize state of the art knowledge concerning the diagnosis, clinical management, treatment and clinical research of persons with CFS." The Committee also urges special attention to CFS

research as part of the NIH effort to refine its disease/research categories.

*Irritable Bowel Syndrome [IBS].*—The Committee is pleased with the focus on IBS at the Office of Research of Women's Health and urges additional research in this area.

*Stroke in Women.*—Recognizing that women are the single largest group at risk for death from stroke, the Committee believes that special attention should be focused on better understanding the gender-related differences in this condition. The Committee supports the funding of new and continuing NIH studies on postmenopausal hormone replacement therapy and understanding the impact of hormones on women's vascular systems. The Committee urges the NIH to increase research in stroke among women of all ages, with specific attention to gender-related differences in stroke risk, prevention interventions, acute stroke management, the use of clot buster drugs, post-stroke recovery, long-term outcomes, and quality of care. The Committee further urges NIH to increase research into new therapies for stroke in women including (1) observational research on differences in the way men and women present with stroke symptoms, (2) research addressing how stroke influences the likelihood and severity of cognitive impairment in women, (3) a clinical trial of carotid endarterectomy and angioplasty/stenting in women, (4) studies of differences in how men and women respond to antiplatelet agents for recurrent stroke prevention, and (5) basic science research to address unique brain cell death and repair mechanisms in females. The Committee also urges and recommends all of these important initiatives be subsumed under an NIH mandate for a Women's Agenda for Stroke Prevention, Diagnosis and Treatment.

*Vulvodynia.*—In the last decade, the NIH has supported three important research conferences on vulvodynia, as well as the first prevalence study and clinical trial on the disorder. These efforts have both clearly demonstrated the need for substantial additional research and served to heighten the research community's level of interest in studying vulvodynia. The Committee calls upon the Director to build upon these initial successes by coordinating through the ORWH an expanded, collaborative extramural and intramural research effort into the causes of, and treatments for, vulvodynia. This effort should involve the NICHD, NINDS and other relevant ICs, as well as the NIH Pain Consortium. The Committee also commends the ORWH for working with patient groups, other relevant ICs and women's health offices in other governmental agencies to plan an educational outreach campaign on vulvodynia, as previously requested by the Committee. Finally, the Committee encourages the Director to work with the Center for Scientific Review and ICs to ensure that experts in vulvodynia, and related chronic pain and female reproductive system conditions, are adequately represented on peer-review panels.

#### *Multi-Institute Research Initiatives*

*Antibacterial Therapy.*—The Committee is concerned about the alarming rates of antibiotic resistance and the related increase in morbidity, mortality and health care costs. Little research has been devoted to defining optimal dosing regimens, particularly in defin-

ing the minimal duration of therapy necessary to cure many types of infections. The Committee recognizes that studies of this type require a long-term commitment and are not likely to be funded by pharmaceutical manufacturers since the products are already approved by the FDA. The consensus of many experts is that infections are frequently treated for longer periods of time than are necessary, needlessly increasing the antimicrobial resistance. Therefore, the Committee urges the NIH to support a Clinical Trials Network devoted to defining optimal antibacterial therapy. Multi-center randomized controlled trials to define the necessary length of therapy would create an excellent basis of evidence from which coherent and defensible recommendations could be developed.

*Autism.*—The Committee requests that the Director report to the Committee by July 1, 2008, on progress made to implement the provisions of the Combating Autism Act that are relevant to the NIH, including funding levels for relevant components of the Inter-agency Autism Coordinating Committee’s strategic research plan.

*Bridging the Sciences.*—The Committee believes the “Bridging the Sciences” demonstration program fulfills a need not met elsewhere in the Federal Government by supporting research at the interface between the biological, behavioral, and social sciences with the physical, chemical, mathematical, and computational sciences. The Committee urges the Director to give high priority to the program and to urge active consultation and collaboration with the Department of Energy, the National Science Foundation, and other agencies. The Committee notes the importance of compliance with the statutory provisions dealing with appropriate, multidisciplinary peer review panels and the unique type of research envisioned.

*Children’s Brain Tumors.*—Brain tumors are the most common solid tumor type for children, and the leading cause of pediatric solid tissue cancer deaths. The most common forms of childhood brain tumors, affecting patients ages 0 to 19, are Juvenile Pilocytic Astrocytomas [JPA] and other Pediatric Low Grade Astrocytomas [PLGA]. Because current treatments—chemotherapy and radiotherapy—are invasive, toxic, and cause debilitating side effects/impairments, the Committee strongly urges the NCI, NINDS, NIBIB, and ORD to develop a comprehensive research plan, including specific timeframes, to focus on children’s brain tumors, with the goal of identifying alternative, safer and more effective treatments, as well as a cure. The Committee further encourages the NIH to achieve this objective by targeting basic and clinical research, accelerating the enhancement of the Institutes’ cancer research portfolios, creating research priorities with a sequential agenda and timeline, and facilitating the coordination and collaboration of organizations (both public and private) already funding related research initiatives.

*Chromosome Abnormalities.*—One out of every 180 babies born has a chromosome abnormality that by its very nature is multisystemic because it involves a copy number change in dozens of contiguous genes. The frequency and complexity of these conditions have a major impact on childhood morbidity and mortality. The key to helping these children is creating interdisciplinary, multi-institute research teams. The Committee commends the NIH for supporting

some independent investigators studying chromosome abnormalities and for partnering to sponsor meetings on many conditions, as described in the fiscal year 2008 congressional budget justification. The Committee also encourages the NIH to sponsor mechanisms to support multidisciplinary research focused on devising treatments for the 20,000 babies born every year with a chromosome abnormality, especially those involving chromosome 18.

*Class B Animal Dealers.*—While the Committee recognizes that the use of animals in research, under certain circumstances, has been beneficial to the advancement of biomedical research, the Committee would like assurances that such research is conducted as humanely as possible. In the case of the use of dogs and cats used in research and obtained from Class B dealers, the Committee is concerned that such dealers have the potential to provide animals that have not been treated in accord with USDA regulations for use in federally supported research. The Committee asks the NIH to seek an independent review by a nationally recognized panel of experts of the use of Class B dogs and cats in federally supported research to determine how frequently such animals are used in NIH research and to propose recommendations outlining the parameters of such use, if determined to be necessary.

*Cooley's Anemia.*—The Committee is encouraged by promising research being undertaken in gene therapy, especially regarding thalassemia, or Cooley's anemia. The NIH has indicated that human clinical trials could begin between 2008 and 2010. The Committee urges that this research move forward without delay at the earliest possible date, consistent with safety.

*Distribution of Resources.*—In light of the doubling of the agency's budget over the past 5 years and the rapid encroachment of new medical research challenges such as SARS and threats of bio-weapons, the Committee believes that the NIH should encourage funding of large-scale collaborative efforts to address these and other medical challenges. In addition, while the pace of new challenges has increased, review time for proposals submitted to the Institutes at NIH continues to average about 18 months. The Committee strongly encourages the Director to develop means of encouraging large-scale, multi-institution projects to address significant areas of medical research and to devise means of reducing the time frames between submission of proposals and awarding of grants.

*Down Syndrome.*—The Committee is deeply concerned by the significant decrease in funding for Down syndrome research since fiscal year 2003, and it strongly urges the NIH to increase its investment in this area. Due to recent studies and advances, the Committee believes that further research into how to successfully reduce the many adverse health effects of Down syndrome, including eradicating all the ill effects of the extra chromosome 21 of Down syndrome, is an emerging area of study that deserves NIH's immediate attention. The Committee urges the Director to take note of recent advances in the neurobiology of Down syndrome, especially concerning the structure and function of neural circuits that mediate cognition. These advances point to Down syndrome as a fertile area for research investments that could lead to effective treatments for cognitive difficulties in both adults and children with this

disorder. Because the responsibility for researching Down syndrome rests with multiple Institutes, the Committee notes that it is an ideal candidate for a trans-NIH initiative. The Committee requests an update on these efforts in the fiscal year 2009 congressional budget justifications.

*Fragile X.*—The Committee strongly urges the Director to facilitate and fund public/private partnerships to advance possible treatment strategies and clinical drug trials for this orphan indication, including, but not limited to, mGluR5 antagonists, ampakines, aripiprazole, and lithium. Nine NIH Institutes and the NCCR currently fund 85 diverse grants to find a treatment and cure for Fragile X. Given this array of efforts, the Committee urges the NIH to prepare and implement a blueprint to focus and coordinate strategy for maximizing resources dedicated to Fragile X. In addition, the Committee urges the NIH to convene a scientific session in 2008 to develop pathways to new opportunities for collaborative, directed research across Institutes. The Committee requests that the Director supply to the Committee, no later than September 1, 2008, a progress update on all aspects of Fragile X translational research, including the agency's progress in stimulating and funding partnerships between industry, academia, voluntary health organizations and NIH Institutes focused on pharmacological and other therapeutic interventions.

*Hereditary Hemorrhagic Telangiectasia [HHT].*—The Committee encourages the Director to coordinate the development of an HHT Research Plan with the NINDS, NIDDK, NHLBI, NHGRI, and NICHD and to issue an RFA to optimize opportunities for research identified at the NIH workshop on HHT vascular biology and pathophysiology. The Committee also encourages the NIH to establish an HHT tissue registry through coordination with the Office of Rare Diseases.

*Human Tissue Supply.*—The Committee understands that there is an increased need to provide NIH intramural and extramural researchers with human tissues and organs to study human diseases. The Committee strongly urges the Director, NCCR, and Institutes such as the NCI, NHGRI, NHLBI, NICHD, NIMH, and NINDS to identify and expand support for nonprofit organizations that supply human tissues to NIH-funded researchers.

*Lymphatic Research and Lymphatic Diseases.*—Lymphatic system research falls within and between numerous IC missions, a situation that contributes to its relative neglect as an investigative focus. Therefore, the Committee once again strongly urges that the NIH foster lymphatic research initiatives and awareness across all relevant NIH Institutes and Centers. The Committee also reiterates its earlier requests that relevant ICs specifically cite lymphatic system research in related funding mechanism requests where a lymphatic research component is appropriate.

*Minority Institutions.*—The Committee continues to be pleased with the NIH Director's implementation of various programs focused on developing the research infrastructure at minority health professions institutions, including Research Centers at Minority Institutions, Extramural Biomedical Research Facilities, and the NCMHD. The Committee encourages the Director to work closely with the NCMHD to establish a program of coordination among

these various mechanisms and partner with minority health professions schools to address their infrastructure needs.

*Mitochondrial Disease.*—The Committee encourages the NIH to intensify its research efforts into primary mitochondrial disease, which is also implicated in numerous other diseases such as Parkinson's, Alzheimer's, heart disease, diabetes and cancer. The Committee understands that intensified research into primary mitochondrial disease will help to further understand these other conditions.

*Nanosystems Biology.*—The Committee encourages the Director, along with the NCI, to support a collaborative effort to bring nanotechnology, systems biology and molecular imaging together to examine the molecular basis of cancer, consistent with the Director's Roadmap Initiative. Bringing these three disciplines together may allow researchers to identify specific sub-types of cancer and to better target new interventions. Successful results of such an effort could lead to a molecular classification of many types of cancer and to targeted molecular treatments for molecular-specific disease.

*National Children's Study.*—The Committee was disappointed that the President's budget once again has proposed to eliminate funding for the National Children's Study. The Committee supports full and timely implementation of the study and has included \$110,900,000 within the Office of the Director for that purpose. The fiscal year 2007 appropriation was \$69,000,000. The study aims to quantify the impacts of a broad range of environmental influences, including physical, chemical, biological and social influences, on child health and development. The funding provided will help expand the number of study centers and study locations across the Nation. The Committee urges the NIH to coordinate the involvement of all the relevant Federal partners such that this study is ready for the field by no later than 2008.

*Osteoporosis.*—The Committee urges the NIH to support research into the pathophysiology of bone loss in diverse populations in order to develop targeted therapies to improve bone density and bone quality and to identify racial differences in bone and the origin of racial differences in fracture patterns. Furthermore, the Committee urges research to identify patients at risk for fracture who do not meet current criteria for osteoporosis, as well as to study the effects of current and developing osteoporosis treatments on these patients.

*Pain Consortium.*—The Committee is pleased with the increased activity of the NIH Pain Consortium, including the recent meeting showcasing NIH-funded pain research projects. However, the Committee believes that much more needs to be done to realize the Consortium's full potential. The Committee urges the NIH to convene a conference of outside experts in pain research and care to review the current pain research portfolio at NIH and make recommendations with respect to gaps in pain research that still need to be explored as the end of the congressionally declared Decade of Pain Control and Research approaches. The Committee also suggests that the Pain Consortium have a mechanism for ongoing extramural participation and input, such as an advisory committee consisting of outside experts.

*Pharmacy.*—The Committee is pleased that the NIH recognizes the importance of doctors of pharmacy across the research spectrum as evidenced by the newly created “PharmD Gateway” on the NIH website. The Committee encourages interested organizations to find opportunities that will increase the participation of colleges and schools of pharmacy and doctor of pharmacy clinical scientists in NIH post-graduate training programs such as the clinical pharmacology research (T32) program.

*Spinal Muscular Atrophy [SMA].*—The Committee strongly urges the OD to ensure the success of the SMA Project at the NINDS by providing active and ongoing support from the OD as well as from other related Institutes. The current SMA Project is scheduled to reach its near-term milestones in 2007 and thus it is imperative that the NIH begin planning and budgeting for the necessary successive stages of the project, including funding for clinical trials and the infrastructure that will be needed to support of each of the stages of drug development.

*Statistics.*—The Committee encourages the Office of Extramural Research to update and improve its data-gathering capacity so that it may better track and analyze grant and training award success rates by the academic discipline of the principle investigator.

*Temporomandibular Joint and Muscle Disorders [TMJDs].*—The Committee remains encouraged by actions taken over the last year by NIH to expand research on TMJDs. However, significant additional work is necessary. Because TMJDs are a complex family of diseases and disorders influenced by genetics, gender and environmental and behavioral triggers, research should involve collaborations between many ICs, including the OD, ORWH, NIDCR, NIAMS, NINDS, NIBIB, NIDCD, NIAD, NIDDK, NIMH, NCRR, and NHLBI, as well as the NIH Pain Consortium. The NIH is urged to take quick action to implement the recommendations of the Fourth Scientific Meeting of the TMJ Association, especially its call for the establishment of regional TMJD Centers of Excellence. The Committee again urges the NIBIB to work with the NIDCR to develop bioengineering approaches that will improve diagnostics as well as treatments for TMJD problems. Complex disease research calls for team efforts involving engineers, computer scientists and medical scientists to study the jaw anatomy, physiology and the complex nervous, endocrine and immune system interactions that orchestrate jaw function. The Committee calls on the Director to coordinate the work of all relevant ICs and give priority to collaborative, cross-cutting research. While the Committee is pleased that the NIH has developed a new brochure for TMJD patients, it once again calls on the NIH to develop informational materials directed to medical, dental and allied health professionals to improve understanding of TMJDs and their frequent co-morbidities such as mitral valve prolapse, irritable bowel syndrome, chronic fatigue syndrome and fibromyalgia.

*Tuberous Sclerosis Complex [TSC].*—Because of the effects of TSC on multiple organ systems, the Committee urges the Office of the Director to continue the coordination of TSC research activities through the Trans-NIH Tuberous Sclerosis Coordinating Committee.

*Urological Research.*—The Committee strongly urges the Director to continue to increase and accelerate the research portfolio in urology. The Committee further urges the Director to coordinate and stimulate urology-related research across the NIH and other Federal agencies.

OFFICE OF AIDS RESEARCH

The Committee recommendation does not include a direct appropriation for the Office of AIDS Research [OAR]. Instead, funding for AIDS research is included within the appropriation for each Institute, Center, and Division of the NIH. The recommendation also includes a general provision which directs that the funding for AIDS research, as determined by the Director of the National Institutes of Health and the OAR, be allocated directly to the OAR for distribution to the Institutes consistent with the AIDS research plan. The recommendation also includes a general provision permitting the Director of the NIH and the OAR to shift up to 3 percent of AIDS research funding among Institutes and Centers throughout the year if needs change or unanticipated opportunities arise. The Committee requests that the Director provide notification to the Committee in the event the Directors exercise the 3 percent transfer authority.

The NIH Office of AIDS Research [OAR] coordinates the scientific, budgetary, legislative, and policy elements of the NIH AIDS research program. The NIH Revitalization Act Amendments of 1993 mandates the OAR to develop an annual comprehensive plan and budget for all NIH AIDS research and to prepare a Presidential bypass budget.

BUILDINGS AND FACILITIES

Appropriations, 2007 .....	\$81,081,000
Budget estimate, 2008 .....	136,000,000
Committee recommendation .....	121,081,000

The Committee recommends an appropriation of \$121,081,000 for buildings and facilities [B&F]. The budget request is \$136,000,000 and the fiscal year 2007 appropriation was \$81,081,000.

*Building Improvements.*—The Committee is aware that in the conduct of research in buildings of the type and age of those operated and owned by the NIH, it will sometimes be necessary to conduct improvements, including renovations and alterations, and/or repairs to meet program objectives; and that the needs for such activities often cannot be anticipated in budgets prepared a year or more in advance. The Committee, therefore, has included a provision to clarify that consistent with long-standing NIH practice, funds appropriated to the Institutes and Centers may be used for improvements (renovation/alterations) and repairs provided that (1) the funds are not already included in the buildings and facilities appropriation, (2) the improvements and repairs funded are principally for the benefit of the program from which the funds are drawn, and (3) such activities are conducted under and subject to the administrative policies and procedures of the NIH Office of the Director. The Committee has included a limitation on the size of projects to be funded directly by the Institutes and Centers.

## SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION

Appropriations, 2007 .....	\$3,327,021,000
Budget estimate, 2008 .....	3,167,589,000
Committee recommendation .....	3,404,798,000

The Committee recommends \$3,404,798,000 for the Substance Abuse and Mental Health Services Administration [SAMHSA] for fiscal year 2008. This amount is \$77,777,000 above the comparable fiscal year 2007 level and \$237,209,000 above the administration request. The recommendation includes \$126,663,000 in transfers available under section 241 of the Public Health Service Act. SAMHSA is responsible for supporting mental health programs and alcohol and other drug abuse prevention and treatment services throughout the country, primarily through categorical grants and block grants to States.

The Committee has provided funding for programs of regional and national significance under each of the three SAMHSA centers: mental health services, substance abuse treatment, and substance abuse prevention. Separate funding is available for the children's mental health services program, projects for assistance in transition from homelessness, the protection and advocacy program, data collection activities undertaken by the Office of Applied Studies and the two block grant programs: the community mental health services block grant and the substance abuse prevention and treatment block grant.

## CENTER FOR MENTAL HEALTH SERVICES

Appropriations, 2007 .....	\$883,858,000
Budget estimate, 2008 .....	807,228,000
Committee recommendation .....	923,812,000

The Committee recommends \$923,812,000 for mental health services. This amount is \$39,954,000 above the comparable level for fiscal year 2007 and \$116,584,000 above the administration request. The recommendation includes \$21,413,000 in transfers available under section 241 of the Public Health Service Act. Included in the recommendation is funding for programs of regional and national significance, the mental health performance partnership block grant to the States, children's mental health services, projects for assistance in transition from homelessness, and protection and advocacy services for individuals with mental illnesses.

*Programs of Regional and National Significance*

The Committee recommends \$298,217,000 for programs of regional and national significance. This amount is \$34,954,000 above the comparable level for fiscal year 2007 and \$111,584,000 above the administration request. Programs of regional and national significance [PRNS] address priority mental health needs through developing and applying best practices, offering training and technical assistance, providing targeted capacity expansion grants, and changing the delivery system through family, client-oriented and consumer-run activities.

The Committee notes that current prevention and health promotion programs are filtered through a fractured array of services and systems, with behavioral health often not seen as an integral

part of overall health. Effective collaboration among mental health and public health systems is essential to provide a comprehensive range of services to promote the health and well-being of children, families, and communities. The Committee recommendation includes \$15,000,000 for SAMHSA to assist local communities in the coordination and improvement of the integration of behavioral/mental and physical health services. The Committee expects SAMHSA to collaborate with HRSA on this initiative, as well as coordinate with the Centers for Disease Control and Prevention.

The Committee intends that the funding provided will allow local communities to undertake a range of prevention activities that include: (1) the development of a comprehensive plan to integrate behavioral and physical health; (2) integration of early childhood systems of care to blend services and supports from health, mental health, substance abuse, education and social services; and (3) development of community-based networks for preventative and primary care that coordinates and integrates behavioral and physical health service delivery. Successful grantees must be able to demonstrate partnerships among public health, mental health, substance abuse and early childhood and elementary education systems. The Committee expects that grantees must be able to evaluate the success of the program based on their ability to provide evidence-based services.

The Committee remains deeply concerned that each year more than 3,000 Americans between the ages of 15 and 24 die by suicide, making suicide the third leading cause of death among adolescents. Beginning in fiscal year 2005, the Committee has provided funding each year for grants to States and tribes to develop youth suicide prevention and early intervention programs. The Committee recommendation includes \$30,000,000 for these grants, \$12,180,000 above last year's level and the administration request. In addition, the Committee has provided \$5,000,000 for campus-based programs that address youth suicide prevention. The Committee also provides \$5,000,000 for the Suicide Prevention Resource Center.

The Committee intends that no less than last year's level of funding be used for preventing youth violence. This initiative includes the Safe Schools/Healthy Students interdepartmental program. The administration proposed cutting this initiative by \$17,446,000. The Committee believes that enhanced school and community-based services can strengthen healthy child development, thus reducing violent behavior and substance use.

The Committee recommendation provides funding at last year's level for statewide consumer network grants and statewide family network grants. The administration proposed eliminating both of these programs. The Committee also provides funding at last year's level for the consumer and consumer-supporter national technical assistance centers. The Committee directs CMHS to support multi-year grants to five such national technical assistance centers.

The Committee reiterates its strong support for the national child traumatic stress network [NCTSN]. The recommendation includes \$35,000,000 to support grants through the NCTSN that will develop knowledge of best practices, offer trauma training to mental health and other child-serving providers, and provide mental health services to children and families suffering from post-trau-

matic stress disorder [PTSD] and other trauma-related disorders as a result of having witnessed or experienced a traumatic event. The Committee encourages the expansion of the number of network centers, with preference to applicants with prior experience in the NCTSN and extensive experience in the field of trauma-related mental disorders in children, youth, and families.

The Committee recommendation restores over \$73,000,000 in funding to programs that the administration proposed to be reduced or eliminated within PRNS. The budget request proposes to eliminate the minority fellowship program, mental health systems transformation activities, children's programs, the anti-stigma campaign, as well as the older adult program. The administration has proposed a reduction of \$6,216,000 for the State incentives grant for transformation. The Committee recommendation includes funding at last year's level for these and other programs within CMHS.

*Disaster Mental Health.*—The Committee recognizes the significant impact that natural and human-made disasters can have on mental and behavioral health. In particular, such events can lead to negative mental and behavioral health consequences for vulnerable populations, including older adults, children, individuals with disabilities, and ethnic minorities. The Committee acknowledges the role of the Emergency Mental Health and Traumatic Stress Services Branch in supporting the emotional recovery of those impacted by trauma and disasters. The Committee encourages this branch, in collaboration with FEMA, to increase attention to the mental and behavioral health needs of vulnerable populations during and in the aftermath of a disaster.

*Juvenile Justice.*—The Committee encourages SAMSHA to give high priority to projects that coordinate, screen, assess, diagnose and treat juveniles who have had encounters with the juvenile justice system. The Committee is encouraged by the results of such programs that have shown significant decreases in contacts with law enforcement.

*Mental Health of Older Adults.*—The Committee recognizes that older adults are among the fastest growing subgroups of the U.S. population. Approximately 20–25 percent of older adults have a mental or behavioral health problem. In fact, older white males (age 85 and over) currently have the highest rates of suicide of any group in the United States. The Committee acknowledges the efforts of SAMHSA to address the mental and behavioral health needs of older adults through the targeted capacity expansion grant program. The Committee encourages increased support for communities to assist them in building a solid foundation for delivering and sustaining effective mental health outreach, treatment and prevention services for older adults at risk for a mental disorder.

*Teenage Depression and Suicide.*—According to the Centers for Disease Control and Prevention, teen suicide rates in the United States increased by 18 percent between 2003 and 2004. The Committee is deeply concerned by this disturbing development and urges SAMHSA to strengthen its efforts to assist local educational systems and non-profit entities to implement mental health screening and suicide prevention programs and to identify evidence-based practices for facilitating treatment for youth at risk. As evidence-based programs are developed and identified, the Committee

strongly urges SAMHSA to determine how these practices can be best implemented at the community level.

The Committee recommendation also includes language requiring that funds be provided to the following organizations in the amounts specified:

Project	Committee recommendation	Requested by
Access Community Health Network, Chicago, IL, for behavioral health integration programs.	\$500,000	Durbin
Carroll County Youth Service Bureau, Westminster, MD, for mental health programs for youth.	350,000	Cardin, Mikulski
Children's Coalition for Northeast Louisiana, Monroe, LA, to expand a nationally-recognized, community-based mental illness screening program for middle school youth.	250,000	Landrieu
Community Counseling Center, Portland, ME, for the expansion of the Greater Portland Trauma Assistance Network.	100,000	Collins, Snowe
Corporate Alliance for Drug Education, Philadelphia, PA, for mental health programs.	100,000	Specter
Essex County, Newark, NJ, for a mental health initiative .....	750,000	Lautenberg, Menendez
New Mexico Human Services Department, Behavioral Health Collaborative, Santa Fe, NM, to transform the behavioral health services system.	250,000	Bingaman, Domenici
Oregon Partnership, Portland, Oregon, for mental health services and programs.	100,000	Smith
Rosebud Sioux Tribe, Rosebud, SD, Rosebud, SD, for youth residential and outpatient therapy at Piya Mani Otipi.	150,000	Johnson
Sacramento Housing and Redevelopment Agency, Sacramento, CA, for services to the chronically homeless.	100,000	Boxer
Samaritans of Rhode Island, Providence, RI, to enhance the Suicide Crisis Hotline.	250,000	Reed, Whitehouse
Spurwink Services, New Gloucester, ME, to improve early detection, training, timely access and evaluating best practice models for child mental health services.	135,000	Collins, Snowe
United Way of Anchorage, Anchorage, AK, for the 211 project to provide a statewide health and human services management system for Alaska.	600,000	Stevens
Wisconsin Department of Agriculture, Transportation and Consumer Protection, Madison, WI, to provide mental health services for farmers and their families throughout Wisconsin.	100,000	Kohl

### *Community Mental Health Services Block Grant*

The Committee recommends \$428,256,000 for the community mental health services block grant, which is the same as the comparable fiscal year 2007 amount and the administration request. The recommendation includes \$21,413,000 in transfers available under section 241 of the Public Health Service Act.

The community mental health services block grant distributes funds to 59 eligible States and Territories through a formula based upon specified economic and demographic factors. Applications must include an annual plan for providing comprehensive community mental health services to adults with a serious mental illness and children with a serious emotional disturbance. Because the mental health needs of our Nation's elderly population are often not met by existing programs and because the need for such services is dramatically and rapidly increasing, the Committee encourages SAMHSA to require that States' plans include specific provisions for mental health services for older adults.

### CHILDREN'S MENTAL HEALTH SERVICES

The Committee recommends \$104,078,000 for the children's mental health services program. This amount is the same as the com-

parable fiscal year 2007 level and the administration request. This program provides grants and technical assistance to support community-based services for children and adolescents with serious emotional, behavioral or mental disorders. Grantees must provide matching funds, and services must involve the educational, juvenile justice, and health systems.

PROJECTS FOR ASSISTANCE IN TRANSITION FROM HOMELESSNESS  
[PATH]

The Committee recommends \$54,261,000 for the PATH Program. This amount is the same as the comparable fiscal year 2007 level and the administration request.

PATH provides outreach, mental health, and case management services and other community support services to individuals with serious mental illness who are homeless or at risk of becoming homeless. The PATH program makes a significant difference in the lives of homeless persons with mental illnesses. PATH services eliminate the revolving door of episodic inpatient and outpatient hospital care. Multidisciplinary teams address client needs within a continuum of services, providing needed stabilization so that mental illnesses and co-occurring substance abuse and medical issues can be addressed. Assistance is provided to enhance access to housing, rehabilitation and training, and other needed supports, assisting homeless people in returning to secure and stable lives.

PROTECTION AND ADVOCACY

The Committee recommends \$39,000,000 for the protection and advocacy for individuals with mental illness [PAIMI] program, which is \$5,000,000 above the comparable fiscal year 2007 level and the administration request. This program helps ensure that the rights of mentally ill individuals are protected while they are patients in all public and private facilities, or while they are living in the community, including their own homes. Funds are allocated to States according to a formula based on population and relative per capita incomes.

The Committee is aware that many protection and advocacy [P&A] agencies are playing a role in correctional facilities, which are increasingly holding people with mental illness who have not received the supports they need in the community. Nationally as many as 20 percent of Americans in jail or prison have a serious mental disorder. Providing P&A services to individuals with mental illness leaving correctional facilities can improve their reentry into communities and can reduce recidivism. The additional funding provided by the Committee will allow P&A agencies to improve conditions in jails and prisons, promote prevention and diversion initiatives, and ensure that prisoners with mental illness are prepared to reenter society with the supports and services needed to do well.

CENTER FOR SUBSTANCE ABUSE TREATMENT

Appropriations, 2007 .....	\$2,157,540,000
Budget estimate, 2008 .....	2,110,681,000
Committee recommendation .....	2,185,159,000

The Committee recommends \$2,185,159,000 for substance abuse treatment programs. This amount is \$27,619,000 above the comparable fiscal year 2007 funding level and \$74,478,000 above the administration request. The recommendation includes \$83,500,000 in transfers available under section 241 of the Public Health Service Act. This amount funds substance abuse treatment programs of regional and national significance and the substance abuse prevention and treatment block grant to the States.

The Committee commends SAMHSA for its outreach and work with the National Institute on Drug Abuse [NIDA] and individual State substance abuse authorities to reduce the current 15- to 20-year lag between the discovery of an effective treatment intervention and its availability at the community level. In particular, the Committee applauds SAMHSA for continuing its work with NIDA to strengthen State agencies' capacity to support and engage in research that will foster statewide adoption of meritorious science-based policies and practices. The Committee encourages SAMHSA to continue collaborative work with NIDA and individual States to ensure that research findings are relevant and adaptable by State substance abuse systems.

#### *Programs of Regional and National Significance*

The Committee recommends \$426,568,000 for programs of regional and national significance [PRNS]. The recommendation includes \$4,300,000 in transfers available under section 241 of the Public Health Service Act. The recommendation is \$27,619,000 above the comparable fiscal year 2007 level and \$74,478,000 above the administration request.

Programs of regional and national significance include activities to increase capacity by implementing service improvements using proven evidence-based approaches and science to services activities, which promote the identification of practices thought to have potential for broad service improvement.

The Committee appreciates the administration's emphasis on funding substance abuse treatment services through the access to recovery [ATR] program, screening, brief intervention, referral and treatment [SBIRT] and treatment drug courts, but strongly believes that the reduction or elimination of other treatment capacity efforts and the elimination of most of the science to service activities from the request is not in the Nation's best interest. The administration's requested increases are offset by decreases in opioid treatment activities, treatment for homeless persons and persons with co-occurring substance use and mental health disorders, children and families programs, pregnant and postpartum women programs, recovery support services, and other programs that are small in costs but that provide critical support to States and communities that are attempting to address their serious substance abuse services needs. The administration also proposes to eliminate science to service activities such as Addiction Technology Transfer Centers [ATTCs], the minority fellowship program, Recovery Month and consumer affairs activities that support public education campaigns on prescription drug abuse, drug abuse among the elderly, abuse of inhalants and youth steroid use.

Because of the significant value provided by these activities in combating substance use disorders, the Committee has provided funding for all of CSAT's PRNS activities at no less than last year's level.

Within the funds appropriated for CSAT, the Committee recommends \$20,000,000 for residential treatment programs for pregnant and postpartum women and their children. This amount is \$9,610,000 above the comparable level for fiscal year 2007 and \$16,068,000 above the administration request.

The Committee has provided last year's level for the SBIRT program. This competitive grant program assists States, territories, and tribes in targeting nondependent drug users and is designed to avert the progression of patients from chronic substance abuse problems. The SBIRT program works in primary and general care settings to identify patients in need of treatment and to provide them with appropriate intervention and treatment options.

The Committee recommendation includes an increase of \$13,709,000, as requested by the administration, for criminal justice activities including treatment drug court grants. The Committee urges SAMHSA to ensure through the grant application process that successful applicants for treatment drug court programs demonstrate evidence of consultation and collaboration with the corresponding State substance abuse agency in the planning, implementation and evaluation of the grant.

*Blood Borne Pathogens.*—The Committee is concerned about the prevalence of substance abuse, hepatitis and other blood borne pathogens and encourages SAMHSA to promote liver health education and primary prevention activities. This effort could include the promotion of healthy lifestyle behaviors for all age groups and secondary prevention to promote recovery for those infected with blood borne pathogens.

*Rural and Native Communities.*—The Committee remains concerned by the disproportionate presence of substance abuse in rural and Native communities, particularly for American Indian, Alaska Native and Native Hawaiian communities. The Committee reiterates its belief that funds for prevention and treatment programs should be targeted to those persons and communities most in need of service. Therefore, the Committee has provided sufficient funds to fund projects to increase knowledge about effective ways to deliver services to rural and native communities.

*Screening Persons with HIV.*—According to the nationally representative HIV Cost and Services Utilization Study [HCSUS], almost half of persons with HIV screened positive for illicit drug use or a mental disorder, including depression and anxiety disorder. Unfortunately, health care providers fail to notice mental disorder and substance use problems in almost half of patients with HIV/AIDS, and mental health and substance use screening is not common practice in primary care settings. The Committee encourages SAMHSA to collaborate with HRSA to train health care providers to screen HIV/AIDS patients for mental health and substance use problems.

The Committee recommendation also includes language requiring that funds be provided to the following organizations in the amounts specified:

Project	Committee recommendation	Requested by
Akeela, Inc., Anchorage, AK, for the Re-Entry Program in Anchorage, Alaska .....	\$200,000	Stevens
Anchorage Dept. of Health and Social Services, Anchorage, AK, for the Pathways to Sobriety Project in Anchorage, Alaska.	400,000	Stevens
Asian American Recovery Services, Inc., San Francisco, CA, for substance abuse treatment programs.	200,000	Feinstein
Eddy County, Carlsbad, NM, for substance abuse treatment services .....	1,000,000	Domenici
Heartland Family Services, Inc., Omaha, NE, for the Sarpy County Methamphetamine Treatment Program for women and children.	100,000	Hagel, Ben Nelson
Maine Lighthouse Corp., Bar Harbor, ME, for the Therapeutic Community for the Substance Abuse Treatment project.	100,000	Collins, Snowe
Maniilaq, Inc., Kotzebue, AK, for the Mavsigviq Family Recovery Program in Northwest Arctic Borough Alaska.	500,000	Stevens
Marin Services for Women, Inc., Greenbrae, CA, for substance abuse treatment for low-income women and their children.	200,000	Feinstein
Martin Addiction Recovery Center, Martin, SD, to enhance and expand substance abuse intervention and treatment services.	200,000	Johnson
Metro Homeless Youth Services of Los Angeles, CA, for substance abuse counseling.	250,000	Feinstein
Nicasa in Round Lake, IL, for evening outpatient substance abuse treatment program for women.	350,000	Durbin
San Francisco Department of Human Services, CA, for mental health and substance abuse services for the homeless.	600,000	Feinstein, Boxer
University of South Dakota Center for Disabilities, Sioux Falls, SD, for a rural substance abuse technical assistance center.	200,000	Johnson

#### *Substance Abuse Prevention and Treatment Block Grant*

The Committee recommends \$1,758,591,000 for the substance abuse prevention and treatment block grant. The recommendation includes \$79,200,000 in transfers available under section 241 of the Public Health Service Act. The recommendation is the same as the comparable level for fiscal year 2007 and the administration request. The block grant provides funds to States to support alcohol and drug abuse prevention, treatment, and rehabilitation services. Funds are allocated to the States according to formula. State plans must be submitted and approved annually.

The Committee has not included bill language requested by the administration to withhold at least 5 percent of block grant funds from States unable to submit National Outcome Measures [NOMs] data. The Committee strongly opposes this proposal and believes that punitive policies could threaten or interrupt service delivery.

#### CENTER FOR SUBSTANCE ABUSE PREVENTION

Appropriations, 2007 .....	\$192,902,000
Budget estimate, 2008 .....	156,461,000
Committee recommendation .....	197,108,000

The Committee recommends \$197,108,000 for programs to prevent substance abuse, which is \$4,206,000 above the comparable fiscal year 2007 level and \$40,647,000 above the administration request.

#### *Programs of Regional and National Significance*

The Committee has provided \$197,108,000 for programs of regional and national significance [PRNS]. The Center for Substance Abuse Prevention [CSAP] is the sole Federal organization with responsibility for improving accessibility and quality of substance abuse prevention services. Through the PRNS, CSAP supports: de-

velopment of new practice knowledge on substance abuse prevention; identification of proven effective models; dissemination of science-based intervention information; State and community capacity-building for implementation of proven effective substance abuse prevention programs; and programs addressing new needs in the prevention system.

The Committee expects CSAP to focus its efforts on preventing substance use among youth through environmental and population-based strategies due to the cost effectiveness of these approaches. Further, the Committee instructs that given the paucity of resources for bona fide substance abuse prevention programs and strategies, money specifically appropriated to CSAP for these purposes shall not be reallocated for any other programs or purposes within SAMHSA.

The Committee recommendation includes funding at last year's level for the strategic prevention framework State incentive grant [SPF SIG] program, which is designed to promote, bolster and sustain prevention infrastructure in every State in the country. The Committee recognizes that the lynchpin of the SPF SIG program is State flexibility. Therefore, the Committee urges SAMHSA to promote flexibility in the use of SPF SIG funds in order to allow each State to tailor prevention services based on a needs assessment or plan, rather than pre-determined strategies that may not be appropriate for the populations in their own jurisdiction.

The Committee provides funding at no less than last year's level for the Centers for the Application of Prevention Technologies [CAPTs] instead of the proposed elimination of this program. The Committee is extremely concerned with SAMHSA's proposal to eliminate the CAPTs. The purpose of the CAPTs is to translate the latest substance abuse prevention science and improve the practices of prevention professionals and community coalition members. The CAPTs are SAMHSA's only regional network system that provides substance abuse prevention workforce training through regional conferences, workshops, customized technical assistance, curriculum development, online courses, and trainer events.

The Committee commends the Surgeon General's "Call to Action" on underage drinking, which emphasizes that alcohol remains the most heavily abused substance by America's youth and focuses national attention on this major public health and safety problem. The Committee shares the Surgeon General's concern about new research indicating that the developing adolescent brain may be particularly susceptible to long-term harms from alcohol use, including neurocognitive impairment. Those findings add new urgency to public and private sector efforts to prevent and reduce underage drinking.

The Committee expects the Intergovernmental Coordinating Committee on the Prevention of Underage Drinking [ICCPUD] and its member agencies to continue coordinating national efforts to prevent and reduce underage drinking and its consequences, and develop and pursue efforts to carry out the Surgeon General's Call to Action. Those efforts should include supporting and assisting State and local efforts to carry out the Surgeon General's recommendations. In reporting Monitoring the Future and other substance use surveillance data, the Committee expects SAMHSA to

collaborate with NIDA and other ICCPUD agencies to separately and prominently highlight alcohol-related findings.

In support of the Surgeon General's recommendations for strengthening national efforts to prevent and reduce underage drinking, the the Committee recommendation includes \$4,000,000 for activities authorized by the Sober Truth on Preventing [STOP] Underage Drinking Act. This amount includes \$1,000,000 for continuation of the national adult-oriented media campaign to prevent underage drinking and \$3,000,000 for grants to help community coalitions address underage drinking.

The Committee supports the continuation and enhancement of SAMHSA's Fetal Alcohol Spectrum Disorders [FASD] Center for Excellence, and has included funding at last year's level for FASD activities. The Committee requests that SAMHSA submit a progress report in its fiscal year 2009 congressional budget justification on the Center's accomplishments and lessons learned in preventing and reducing fetal alcohol spectrum disorders. The report should outline future plans for the Center, including programmatic and funding priorities.

The Committee recommendation also includes language requiring that funds be provided to the following organizations in the amounts specified:

Project	Committee recommendation	Requested by
Cheyenne River Sioux Tribe, Eagle Butte, SD, for a methamphetamine prevention program.	\$400,000	Johnson
Clinton County Office of District Attorney, Lock Haven, PA, for substance abuse prevention programs.	100,000	Specter
Community Health Center on the Big Island of Hawaii .....	200,000	Inouye
Institute for Research, Education and Training in Addictions, Pittsburgh, PA, for substance abuse prevention programs.	100,000	Specter
Iowa Office of Drug Control Policy, Des Moines, IA, to educate parents about drug use by teenagers.	100,000	Harkin
Municipality of Anchorage, Anchorage, AK, for methamphetamine education project in Alaska.	400,000	Stevens, Murkowski
Seton Hill University, Greensburg, PA, for substance abuse prevention programs.	100,000	Specter
Standing Rock Sioux Tribe, Fort Yates, ND, for a methamphetamine prevention program.	400,000	Johnson
Tanana Chiefs Conference, Fairbanks, AK, for the Ch'eghutsen Children's Mental Health Program in Interior Alaska.	500,000	Stevens

#### PROGRAM MANAGEMENT

The Committee recommends \$98,719,000 for program management activities of the agency. The recommendation includes \$21,750,000 in transfers available under section 241 of the Public Health Service Act. The recommendation is \$5,998,000 above the comparable level for fiscal year 2007 and \$5,500,000 above the budget request. The program management activity includes resources for coordinating, directing, and managing the agency's programs. Program management funds support salaries, benefits, space, supplies, equipment, travel, and departmental overhead required to plan, supervise, and administer SAMHSA's programs. The Committee has included an additional \$4,000,000 to maintain the level of effort for the National Survey on Drug Use and Health [NSDUH].

Despite the significant levels of Federal, State, and local funding for mental health services, and a growing consensus that the Nation’s mental healthcare system must be reformed, there are no current regular and periodic population-based sources of data on adults with serious mental illness and children with serious emotional disturbance. The Committee believes that such data are necessary to help policymakers implement the recommendations in the President’s New Freedom Commission on Mental Health report “Achieving the Promise: Transforming Mental Health Care in America.”

On the recommendation of a meeting in December 2006 of mental health researchers and stakeholders, the Committee is funding the development and calibration of a module in the National Survey on Drug Use and Health [NSDUH] to provide reliable and valid data on adults with serious mental illness.

The meeting of experts also recommended the use of the National Health Interview Survey [NHIS], conducted by the National Center for Health Statistics at CDC, as the best mechanism to collect information on children with serious emotional disturbance. Thus the Committee is providing, in addition to the funds needed to continue the validation and calibration studies on NSDUH, \$1,500,000 to include mental health questions in the NHIS and to carry out studies necessary to ensure the validity and reliability of the NHIS data.

The Committee is aware of collaborative work by SAMHSA and State substance abuse directors to implement outcomes data collection and reporting through the NOMs initiative. The Committee commends States and SAMHSA for working to streamline data reporting, reduce administrative burden, and improve accountability. The Committee is encouraged by work to examine and promote effective non-proprietary data management tools and State-to-State problem solving solutions. The Committee notes that States are making progress in reporting NOMs information through the SAPT block grant. According to SAMHSA, approximately 40 States voluntarily reported substance abuse outcomes data through the SAPT block grant in 2006. States reported positive improvements in a number of data domains—including abstinence from alcohol and drug use; housing status; criminal justice involvement; and employment.

AGENCY FOR HEALTHCARE RESEARCH AND QUALITY

Appropriations, 2007 .....	\$318,986,000
Budget estimate, 2008 .....	329,564,000
Committee recommendation .....	329,564,000

The Committee recommends \$329,564,000 for the Agency for Healthcare Research and Quality [AHRQ]. This amount is \$10,578,000 above the comparable funding level for fiscal year 2007 and is the same as the administration request. The Committee has funded AHRQ through budget authority rather than through transfers available under section 241 of the Public Health Service Act.

The Agency for Healthcare Research and Quality was established in 1990 to promote improvements in clinical practice and patient outcomes, promote improvements in the financing, organization, and delivery of health care services, and increase access to quality care. AHRQ is the Federal agency charged to produce and disseminate

nate scientific and policy-relevant information about the cost, quality, access, and medical effectiveness of health care. AHRQ provides policymakers, health care professionals, and the public with the information necessary to improve cost effectiveness and appropriateness of health care and to reduce the costs of health care.

#### HEALTH COSTS, QUALITY, AND OUTCOMES

The Committee provides \$271,564,000 for research on health costs, quality and outcomes [HCQO]. This amount is \$10,578,000 above the comparable funding level for fiscal year 2007 and is the same as the administration request. HCQO research activity is focused upon improving clinical practice, improving the health care system's capacity to deliver quality care, and tracking progress toward health goals through monitoring and evaluation.

Of the total amount provided for HCQO the Committee has included \$78,934,000 to continue AHRQ's patient safety program. Of this amount, \$44,820,000 will support the Department's initiative to promote the development, adoption, and diffusion of information technology in health care.

The Committee has not provided funding for the administration's personalized health care initiative. Instead, the Committee recommendation includes \$30,000,000 for research regarding the outcomes, comparative effectiveness and appropriateness of health care interventions. The Committee's recommendation doubles the amount provided for this research, which was authorized under section 1013 of the Medicare Prescription Drug, Improvement and Modernization Act of 2003.

The Committee is aware that despite having the most expensive health care system in the world based on per capita expenditures, the United States ranks well below other countries on key health indicators, such as overall life expectancy and infant survival. Studies have shown that much of this is due to health care that lacks a basis in evidence. Studies have estimated that up to 30 percent of the Nation's health care spending pays for ineffective, inappropriate or redundant care.

In order to help providers and patients achieve the best quality care, the Committee believes we need a sound foundation of evidence about which treatments work best. AHRQ's comparative effectiveness research program helps patients and providers make informed decisions about treatment options by providing them with unbiased, practically useful information on the benefits and risks of treatments for common health problems. With funding provided by the Committee in previous years, AHRQ has released final reports focusing on interventions of special importance to Medicare beneficiaries, such as the effectiveness of the most commonly prescribed antidepressants, the use of stents for patients with narrow kidney arteries, and the accuracy of noninvasive tests for breast cancer. The additional funding provided by the Committee will allow AHRQ to undertake a greater number of reviews of health care interventions including drugs, devices, medical procedures and other treatments that have the most impact on Medicare, as well as allow the agency to expand its research to the Medicaid and SCHIP programs.

*Deep Vein Thrombosis.*—Numerous studies conducted on deep vein thrombosis [DVT] have shown that there is a gap between knowledge and practice. A recent large scale national study found that only one-third of acute hospital patients who were at risk for DVT actually received the pharmacological or mechanical prophylaxis according to established guidelines. The Committee urges AHRQ to disseminate and make available evidence-based information to healthcare providers and patients as a step toward reducing the risks of serious and life-threatening complications from DVT.

*Investigator-initiated Research.*—The Committee values AHRQ for its critical role in supporting health services research to improve health care quality, reduce costs, advance patient safety, decrease medical errors, eliminate health care disparities, and broaden access to essential services. However, the Committee is troubled that AHRQ's investigator-initiated research portfolio has languished, even though many of the sentinel studies that have changed the face of health and health care in the United States are the result of researchers' ingenuity and creativity. To advance scientific discovery and the expansion of knowledge, AHRQ should invest at least as much on an investigator-initiated research agenda as it does on intramural health services research. The Committee urges the Department to expand funding for AHRQ's investigator-initiated research in its fiscal year 2009 budget request.

*Safe Patient Handling.*—The Committee is concerned about the consequences of manual patient lifting in hospitals, nursing homes and other patient care settings that increase the risk to patients of injuries such as skin tears, skin ulceration, falls and shoulder dislocations. Moreover, workplace injuries to nurses, such as back, shoulder and neck injuries, exacerbate the nursing shortage with loss of work time or debilitating, career-ending injuries. The Committee urges AHRQ to study the impact of utilizing assistive devices and patient lifting equipment on patient injuries and outcomes, as well as the health and safety of nurses.

*Spina Bifida.*—The Committee encourages AHRQ to continue its efforts to validate quality patient treatment data measures for the National Spina Bifida Patient Registry being developed in partnership with the Centers for Disease Control and Prevention. The Committee requests that the Agency report on the status of this effort in its fiscal year 2009 congressional budget justification.

*Unit-of-use Packaging.*—The Committee is aware that the Institute of Medicine has recognized the potential benefits provided to patients by unit-of-use packaging, which are drug products dispensed directly to patients in containers that provide enough medication for use during a specified time interval. The Committee urges AHRQ to conduct a comprehensive study to evaluate unit-of-use packaging and design approaches that would support various patient populations in their medication self-management, including children, chronically ill patients, patients taking prescription narcotics, and patients taking antibiotics.

#### MEDICAL EXPENDITURES PANEL SURVEYS

The Committee provides \$55,300,000 for health insurance and medical expenditures panel surveys [MEPS], which is the same as the comparable fiscal year 2007 level and the administration re-

quest. MEPS is intended to obtain timely national estimates of health care use and expenditures, private and public health insurance coverage, and the availability, costs and scope of private health insurance benefits. It also develops cost and savings estimates of proposed changes in policy and identifies impact of policy changes on payers, providers, and patients.

#### PROGRAM SUPPORT

The Committee recommends \$2,700,000 for program support. This amount is the same as the comparable fiscal year 2007 level and the administration request. This activity supports the overall management of the agency.

#### CENTERS FOR MEDICARE AND MEDICAID SERVICES

##### GRANTS TO STATES FOR MEDICAID

Appropriations, 2007 .....	\$105,470,957,000
Budget estimate, 2008 .....	141,628,056,000
Committee recommendation .....	141,628,056,000

The Committee recommends \$141,628,056,000 for Grants to States for Medicaid, the same amount as the administration's request. This amount excludes \$65,257,617,000 in fiscal year 2007 advance appropriations for fiscal year 2008. In addition, \$67,292,669,000 is provided for the first quarter of fiscal year 2009, as requested by the administration.

The Medicaid program provides medical care for eligible low-income individuals and families. It is administered by each of the 50 States, the District of Columbia, Puerto Rico, and the territories. Federal funds for medical assistance are made available to the States according to a formula, which determines the appropriate Federal matching rate for State program costs. This matching rate is based upon the State's average per capita income relative to the national average, and shall be no less than 50 percent and no more than 83 percent.

##### PAYMENTS TO HEALTH CARE TRUST FUNDS

Appropriations, 2007 .....	\$176,298,480,000
Budget estimate, 2008 .....	188,628,000,000
Committee recommendation .....	188,828,000,000

The Committee recommends \$188,828,000,000 for Federal payments to health care trust funds. This amount is \$200,000,000 more than the administration's request. This entitlement account includes the general fund subsidy to the Federal Supplementary Medical Insurance Trust Fund for Medicare part B benefits and for Medicare part D drug benefits and administration, plus other reimbursements to the Federal Hospital Insurance Trust Fund for part A benefits and related administrative costs that have not been financed by payroll taxes or premium contributions. The Committee has provided \$140,704,000,000 for the Federal payment to the Supplementary Medical Insurance Trust Fund. This payment provides matching funds for premiums paid by Medicare part B enrollees. The Committee further provides \$46,299,000,000 for the general fund share of benefits paid under Public Law 108-173, the Medicare Prescription Drug, Improvement and Modernization Act of

2003. The Committee includes bill language requested by the administration providing indefinite authority for paying the General Revenue portion of the part B premium match and provides resources for the part D drug benefit program in the event that the annual appropriation is insufficient. The recommendation also includes \$269,000,000 for hospital insurance for the uninsured. The Committee also recommends \$237,000,000 for Federal uninsured benefit payment. This payment reimburses the Hospital Insurance Trust Fund for the cost of benefits provided to Federal annuitants who are eligible for Medicare. The Committee recommendation includes \$192,000,000 to be transferred to the Hospital Insurance Trust Fund as the general fund share of CMS Program Management administrative expenses. The Committee recommendation also includes \$744,000,000 to be transferred to the Supplementary Insurance Trust Fund as the general fund share of part D administrative expenses. The Committee recommendation includes \$383,000,000 in reimbursements to the Health Care Fraud and Abuse Control [HCFAC] fund.

PROGRAM MANAGEMENT

Appropriations, 2007 .....	\$3,141,107,000
Budget estimate, 2008 .....	3,274,026,000
Committee recommendation .....	3,248,088,000

The Committee recommends \$3,248,088,000 for CMS program management, which is \$106,981,000 more than the fiscal year 2007 enacted level.

*Research, Demonstrations, and Evaluations*

The Committee recommends \$35,325,000 for research, demonstrations, and evaluation activities, \$1,625,000 more than the administration's request.

CMS research and demonstration activities facilitate informed rational Medicare and Medicaid policy choices and decision making. These studies and evaluations include projects to measure the impact of Medicare and Medicaid policy analysis and decision making, projects to measure the impact of Medicare and Medicaid on health care costs, projects to measure patient outcomes in a variety of treatment settings, and projects to develop alternative strategies for reimbursement, coverage, and program management.

The Committee has included \$10,000,000 for Real Choice Systems Change Grants for Community Living to States to fund initiatives that establish enduring and systemic improvements in long-term services and supports.

The Committee recommendation also includes bill language requiring that funds be provided to the following organizations in the amounts specified:

Project	Committee recommendation	Requested by
Medicare Chronic Care Practice Research Network, Sioux Falls, SD, to evolve and continue the Medicare Coordinated Care Demonstration project.	\$675,000	Johnson
Mississippi Primary Health Care Association, Jackson, MS, for the Mississippi PharmNet South 340B Initiative, a 340B health information technology model.	100,000	Cochran
Mosaic, Des Moines, IA, for the Iowa Community Integration Project .....	350,000	Harkin

Project	Committee recommendation	Requested by
University of Mississippi, University, MS, for the Medication Use and Outcomes Research Group.	400,000	Cochran
University of North Carolina School of Pharmacy, Chapel Hill, NC, to study the impact of a primary care practice model utilizing clinical pharmacist practitioners to improve the care of Medicare-eligible populations in NC.	100,000	Burr

### *Medicare Operations*

The Committee recommends \$2,276,052,000 for Medicare operations, which is \$27,563,000 less than the administration's request.

The Medicare operations line item covers a broad range of activities including claims processing and program safeguard activities performed by Medicare contractors. These contractors also provide information, guidance, and technical support to both providers and beneficiaries. In addition, this line item includes a variety of projects that extend beyond the traditional fee-for-service arena.

The Committee recommends that not less than \$35,000,000 be made available for the State Health Insurance Counseling Program. SHIPs provide one-on-one counseling to beneficiaries on complex Medicare-related topics, including Medicare entitlement and enrollment, health plan options, prescription drug benefits, Medigap and long-term care insurance, and Medicaid.

The committee recommendation includes \$500,000 to support activities of the National Center on Senior Benefits Outreach and Enrollment within the Administration on Aging. CMS is directed to coordinate with AoA to utilize cost effective strategies to find and enroll those with greatest need in part D and other health and human services assistance for which they are eligible.

The Committee includes bill language that extends the availability of funds for Medicare contracting reform until September 30, 2009 but does not include language, requested by the Administration that directs CMS to ensure that no fewer than 15 Medicare administrative contractors begin operations by December 15, 2008.

The Committee recommends that \$49,869,000 be made available for obligation over a 2-year period ending September 30, 2009, for contract costs pursuant to the development of the Healthcare Integrated General Ledger Accounting System [HIGLAS].

Advances in medicine have enabled increasing numbers of Type 1 diabetes patients to live with this disease for more than 50 years. Recent advances in continuous glucose monitoring technology have the potential to revolutionize the way diabetes is managed on a daily basis. While research is underway, the Committee urges CMS not to make premature coverage decisions for this durable medical equipment nor take actions that would delay the private adoption of these technologies.

In early 2007 CMS promulgated new regulations for long term acute care hospitals [LTACHS]. The Committee is concerned that the CMS guidelines once again set arbitrary quota limits for the number of patients which an LTACH can accept from any one hospital. Patients who need access to LTACHS are among the most vulnerable of the sick.

This Committee has previously stated that the decision as to which patients should go into a LTACH should be made by physi-

cians based on well-defined patient and hospital admissions criteria—not on arbitrary quotas. The Medicare Payment Advisory Commission [MEDPAC] in its March 22, 2007 letter to CMS warned that arbitrary criteria increase the risk of unintended consequences.

The Committee expects that CMS will work closely with providers and others in an expedited timetable to develop and promulgate realistic and workable admissibility criteria which will allow for the reasonable and measured expansion of the LTACH system.

The Committee is aware of concerns that Medicare beneficiaries have inconsistent access to recreational therapy [RT] services in various inpatient settings due a lack of clarity in CMS regulations. These settings are inpatient rehabilitation facilities [IRFs], skilled nursing facilities [SNFs] and inpatient psychiatric hospitals [IPFs]. CMS has not adequately communicated policies to these inpatient providers through revisions to its regulations or the Medicare Benefits Policy Manual [MBPM]. This lack of clarity is creating confusion among Medicare providers and contractors and resulting in inconsistent access to recreational therapy for Medicare beneficiaries in need of these services.

The Committee encourages CMS to issue revised regulations or publish policy guidance in the MBPM that clarifies policies related to recreational therapies.

The Committee is aware of the significant Medicare reductions (in excess of 25 percent on average) to the Power Mobility Device [PMD] fee schedule amounts, which became effective November 15, 2006. The Committee strongly encourages CMS not to alter further the PMD fee schedule in effect November 15, 2006 during fiscal year 2008. The Committee further encourages CMS to validate any subsequent alterations in a report based on claims data under current PMD fee schedule amounts. The Committee is concerned that the Medicare Modernization Act provision requiring mandatory provider accreditations has not been fully implemented. Such a requirement will reduce fraud and abuse and ensure beneficiary access only to quality providers and equipment. The Committee believes that the provision of medically necessary PMDs can save Medicare money through cost-avoidance associated with expensive institutional care or hospitalization resulting from falls by the growing elderly population.

The Committee is aware that the Centers for Medicare and Medicaid Services [CMS] has proposed a national coverage decision memorandum for the use of Erythropoiesis Stimulating Agents [ESAs] in Cancer and Related Neoplastic Conditions. Recent concerns have been raised by both CMS and the Food and Drug Administration about the use of ESAs in treating anemia that results from chemotherapy. These concerns may be valid for patients treated with ESAs to high hemoglobin targets (above 12g/dL), but, as the FDA noted, they do not apply to all individuals treated for chemotherapy-induced anemia or bone marrow failure diseases, eg. myelodysplasia. The Committee is concerned that evidence from some studies is being broadly and inappropriately extrapolated, resulting in proposals that are not evidence-based or scientifically rigorous. The committee requests that CMS delay finalizing the Proposed Decision Memo for Erythropoiesis Stimulating Agents

[ESAs] for non-renal disease indications (CAG–00383N) until after the FDA has completed its current review of ESA labeling.

#### *State Survey and Certification*

The Committee recommends \$293,524,000 for Medicare State survey and certification activities, which is the same as the administration's request.

Survey and certification activities ensure that institutions and agencies providing care to Medicare and Medicaid beneficiaries meet Federal health, safety, and program standards. On-site surveys are conducted by State survey agencies, with a pool of Federal surveyors performing random monitoring surveys.

The Committee has included language, requested by the administration, which authorizes the Secretary to charge fees associated with the cost of conducting revisits of certain health care facilities.

#### *Federal Administration*

The Committee recommends \$643,187,000 for Federal administration costs, which is the same as the budget request.

The Committee recommends continuing the Healthy Start, Grow Smart program, which disseminates educational brochures to low-income pregnant women and new mothers. The prenatal brochure provides information on prenatal care and highlights the link between maternal behaviors and development of the unborn child. The remaining brochures are distributed at birth and at key developmental points during the first two years of life. The publications offer vital health and safety information for new parents and focuses on infant brain development and skills these children need to be successful in school.

The Committee commends CMS for supporting rural health interdisciplinary training initiatives. The Committee strongly supports demonstration projects to develop interdisciplinary, collaborative and culturally appropriate family medicine residency, nursing and allied health professions training in rural areas. These projects have the potential to reduce health disparities and to improve access to culturally appropriate health care for underserved populations. The Committee urges CMS to consider waivers of population density requirements for demonstration projects in rural and/or isolated areas.

The Committee encourages CMS to use existing waiver authority under the Public Health Service Act to issue waivers of the governance requirements for Federally Qualified Health Centers [FQHC] look-alike centers to nurse practice arrangements commonly referred to as nurse-managed health centers.

The Committee recognizes that nurse practitioners and nurse-managed health centers are an important part of the Nation's healthcare safety-net serving vulnerable and underserved populations. Vulnerable populations are populations comprised of a high percentage of uninsured patients that lack access to adequate primary care services. The Committee understands that States have the primary role regarding the scope of practice for nurse practitioners and other health practitioners. The Committee is pleased that CMS has taken some steps to ensure that these providers do not face provider-based discrimination when applying for admission

to the primary care provider networks of managed care organizations [MCO] operating around the Nation. The Committee is, however, concerned that a large percentage of MCOs have established policies which unfairly exclude nurse practitioners as a class of providers from their provider panels. The Committee encourages CMS to develop written guidance informing MCOs that Federal regulations allow and encourage nurse practitioners to be part of an MCO's panel of providers. The Committee also encourages CMS to conduct a survey of MCOs to determine the extent to which nurse practitioners are part of their panel of providers and if not, the reasons for that.

Since January 1, 1998, nurse practitioners have been providing reimbursable care to patients as part B providers. Despite their ability to provide and bill for services rendered in all of these areas, they are still unable to order or certify home health care for patients. CMS has referenced the sections 1861(r) of the Social Security Act's definition of physician, which does not include nurse practitioner. The Committee encourages CMS to expand its interpretation of the word "physician" in Part A, section 1814, of the Medicare law to enable nurse practitioners to certify and order hospice and home health care.

The Committee encourages the Secretary to work across the Department to direct its resources toward programs with the highest evidentiary standards, such as randomized trials. For example, the Committee is aware of extensive evidence that Nurse-Family Partnership, an early home visitation program for first-time low-income mothers, prevents child abuse and childhood injury, helps develop positive parent-child relationships, and helps the brain development of the children served. The Committee requests that the Secretary apply the high evidentiary standards to programs across the Department, and to support agencies within the Department, such as Health Resources and Services Administration [HRSA] and Administration for Children and Families [ACF], adopting evidence-based programs.

The Committee encourages the Division of Nursing [DON] to use existing authority under the Nurse Reinvestment Act to consider establishing a grant program that will assist nurse practice arrangements commonly referred to as nurse-managed health centers in securing an alternative means of prospective payment reimbursement for their Medicare and Medicaid clients.

This Committee has supported demonstration projects that have assessed the efficacy of using interactive video technology as a means for providing intensive behavioral health services to individuals with serious emotional and behavioral challenges, such as autism and other at-risk populations. Such projects have assessed the effectiveness of the medium in providing a range of services such as behavior analysis, case management, medical services, psychiatric services, support to education and training. However, the Committee has observed that one of the most serious obstacles to the integration of telemedicine into health practices is the absence of consistent, comprehensive reimbursement policies. Medicare authorizes only partial reimbursement. Medicaid policies set at state levels vary widely and are inconsistent from State to State. The Committee believes that telehealth technology is a way to provide

intensive behavioral health therapy services in a cost effective manner. Further, since the 1999 Supreme Court *Olmstead* decision, the Committee has been dedicating resources towards States to move individuals out of institutions into community-based settings. The Committee recognizes the potential benefits that telehealth technologies can have in supporting the independence, productivity and integration into the community of persons with developmental disabilities.

The Committee urges CMS this year to provide it with a comprehensive survey on a State-by-State basis of telehealth services provided under Medicaid. It further requests that CMS meet with an appropriate array of telehealth specialists including those who have been involved in the demonstration projects supported by this Committee to survey and assess best practices and professional criteria standards and make recommendations to the Committee concerning national standards for telehealth reimbursement which advances and encourages this technology.

The Committee is aware that many low-income Medicare part D enrollees living with HIV/AIDS have benefited from effective medication management programs. In its fiscal year 2008 budget justification, CMS noted that it was considering demonstration authority as a way to test best practice models of medication therapy management programs. The Committee strongly encourages CMS to develop such demonstrations in fiscal year 2008.

The Committee is concerned that many seniors do not have a good understanding of the benefits covered, and not covered, under the Medicare program. In particular, studies have indicated that a majority of adults who are 45 or older overestimate Medicare coverage for long-term care. The Committee commends CMS for stating its intention to inform all target households through its initial mailings that “Medicare generally does not pay” for long-term care. The Committee also encourages the Department to use other communication methods, in addition to the Internet and direct mail, to clarify widely held misperceptions about Medicare and long-term care. This policy would allow individuals to better prepare for their potential long-term care needs without impoverishing themselves to qualify for Medicaid.

HEALTH CARE FRAUD AND ABUSE CONTROL

Appropriations, 2007 .....	
Budget estimate, 2008 .....	\$183,000,000
Committee recommendation .....	383,000,000

The Committee recommends \$383,000,000, to be transferred from the Medicare trust funds, for health care fraud and abuse control activities. This account has not been funded using discretionary funds in prior years. This amount, in addition to the \$1,131,031,000 in mandatory monies for these activities, will provide a total of \$1,514,031,000 for health care fraud and abuse control activities in fiscal year 2008, \$200,000,000 over the budget request.

Reducing fraud, waste, and abuse in Medicare and Medicaid continues to be a top priority of the Committee. The Committee has held a number of hearings on fraud and abuse issues over the past

10 years and expects to begin holding more hearings on this issue over the next 12 months.

ADMINISTRATION FOR CHILDREN AND FAMILIES  
PAYMENTS TO STATES FOR CHILD SUPPORT ENFORCEMENT AND  
FAMILY SUPPORT PROGRAMS

Appropriations, 2007 .....	\$3,263,678,000
Budget estimate, 2008 .....	2,949,713,000
Committee recommendation .....	2,949,713,000

The Committee recommends \$2,949,713,000 be made available in fiscal year 2008 for payments to States for child support enforcement and family support programs. The Committee recommendation is the same as the budget request under current law. The Committee also has provided \$1,000,000,000 in advance funding for the first quarter of fiscal year 2009 for the child support enforcement program, the same as the budget request.

These payments support the States' efforts to promote the self-sufficiency and economic security of low-income families. These funds also support efforts to locate non-custodial parents, determine paternity when necessary, and establish and enforce orders of support.

LOW-INCOME HOME ENERGY ASSISTANCE PROGRAM

Appropriations, 2007 .....	\$2,161,170,000
Budget estimate, 2008 .....	1,782,000,000
Committee recommendation .....	2,161,170,000

The Committee recommends \$2,161,170,000 for fiscal year 2008 for the low income home energy assistance program [LIHEAP]. This is the same as the comparable funding level for fiscal year 2007 and \$379,170,000 above the budget request. LIHEAP is made up of two components: the State grant program and a contingency fund.

The Committee recommendation includes \$1,980,000,000 for the State grant program, which is the same as the comparable funding level for fiscal year 2007 and \$480,000,000 above the budget request. LIHEAP grants are awarded to States, territories, Indian tribes, and tribal organizations to assist low-income households in meeting the costs of home energy. States receive great flexibility in how they provide assistance, including direct payments to individuals and vendors and direct provision of fuel. These resources are distributed by formula to these entities as defined by statute, based in part on each State's share of home energy expenditures by low-income households.

The Committee recommends \$181,170,000 for the contingency fund. This is the same as the comparable funding level for fiscal year 2007 and \$100,830,000 below the budget request. The contingency fund may be used to provide assistance to one or more States adversely affected by extreme heat or cold, significant price increases, or other causes of energy-related emergencies.

## REFUGEE AND ENTRANT ASSISTANCE

Appropriations, 2007 .....	\$587,847,000
Budget estimate, 2008 .....	655,630,000
Committee recommendation .....	654,166,000

The Committee recommends \$654,166,000 for refugee and entrant assistance. The recommendation is \$66,319,000 above the comparable funding level for fiscal year 2007 and \$1,464,000 below the budget request for this program.

The refugee and entrant assistance program is designed to assist States in their efforts to assimilate refugees, asylees, Cuban and Haitian entrants, and adults and minors who are trafficking victims, into American society as quickly and effectively as possible. The program funds State-administered transitional and medical assistance, the voluntary agency matching grant program, programs for victims of trafficking and torture, employment and social services, targeted assistance, and preventive health. Based on an estimated refugee admission ceiling of 70,000, this appropriation enables States to provide 8 months of cash and medical assistance to eligible refugees and entrants, a variety of social and educational services, as well as foster care for refugee and entrant unaccompanied minors.

In order to carry out the refugee and entrant assistance program, the Committee recommends \$294,021,000 for transitional and medical assistance including State administration and the voluntary agency program; \$9,823,000 for victims of trafficking; \$154,005,000 for social services; \$4,748,000 for preventive health; and \$48,590,000 for targeted assistance.

The Committee is troubled by reports that HHS has been hampered by the Department of Homeland Security and the Department of Justice in providing emergency benefits and services to child victims of trafficking. Congress clearly intended in the Trafficking Victims Protection Act of 2000 to allow children to receive assistance regardless of their ability or willingness to participate in an investigation and prosecution of their traffickers. Yet the Committee understands that, in practice, children are often coerced into working with law enforcement because they have contacted HHS for access to services. The Committee expects HHS to use its authority from the Trafficking Victims Protection Act to expedite the determination of eligibility of child victims without delays from law enforcement authorities.

For unaccompanied children, pursuant to section 462 of the Homeland Security Act of 2002, the Committee recommends \$133,162,000. Funds provided are for the care and placement of unaccompanied alien children [UAC] in the Office of Refugee Resettlement [ORR].

The Committee notes that \$25,000,000 of the funding increase provided for the UAC program is for shelter needs, partly due to an estimated 12 percent increase in the average length of stay in ORR facilities. The Committee is alarmed by this increase and directs the Department to prepare a report that identifies factors contributing to increased shelter costs and delays in the release of children from ORR care. The report should examine such factors as backlogs in background checks, issuance of travel documents and

delays in repatriations. The report should also propose cost-effective and expedient solutions to remedy the delays that are costing the Department thousands of dollars in shelter care costs per day.

The Committee has not provided the additional funds requested by the administration for expanded background checks. ORR currently performs background checks on the adult to whom the child is released, as well as home visits when deemed necessary. The Committee believes that expanded background checks would contribute to even lengthier delays in getting children released and even longer periods of time in custody.

The Committee directs ORR to use the increase provided to expand the pro bono legal services initiative. The Committee recognizes the need for unaccompanied children to be appropriately represented before immigration courts and is pleased with the progress ORR has made in providing pro bono counsel and support services for these children. The Committee has provided sufficient funding for ORR to increase its efforts for pro bono legal services in all places where UAC are held in and released from Federal custody. The Committee expects ORR to use part of the increase provided to assess the overall impact of the pro bono legal services initiative.

The Committee also recommends \$9,817,000 to treat and assist victims of torture. These funds may also be used to provide training to healthcare providers to enable them to treat the physical and psychological effects of torture.

CHILD CARE AND DEVELOPMENT BLOCK GRANT

Appropriations, 2007 .....	\$2,062,081,000
Budget estimate, 2008 .....	2,062,081,000
Committee recommendation .....	2,062,081,000

The Committee recommends \$2,062,081,000 for the child care and development block grant. This is the same as the comparable funding level for fiscal year 2007 and the budget request. The child care and development block grant supports grants to States to provide low-income families with financial assistance for child care; for improving the quality and availability of child care; and for establishing or expanding child development programs.

The Committee recommendation continues specific set asides in appropriations language, also included in the budget request, that provide targeted resources to specific policy priorities including \$18,777,370 for the purposes of supporting before and afterschool services, as well as resource and referral programs. This represents the Federal commitment to the activities previously funded under the dependent care block grant. The Committee recommendation sets aside \$267,785,718 for child care quality activities, including \$98,208,000 specifically for an infant care quality initiative. These funds are recommended in addition to the 4 percent quality earmark established in the authorizing legislation. The Committee has provided these additional quality funds because of the considerable research that demonstrates the importance of serving children in high quality child care settings which include nurturing providers who are educated in child development and adequately compensated.

The Committee recommendation also provides \$9,821,000 for child care research, demonstration and evaluation activities.

The Committee recommendation for resource and referral activities also includes \$982,080 to continue support for a national toll-free hotline that assists families in accessing local information on child care options and that provides consumer education materials. The Committee expects the grantee to monitor the quality of services provided to families as a result of the program.

SOCIAL SERVICES BLOCK GRANT

Appropriations, 2007 .....	\$1,700,000,000
Budget estimate, 2008 .....	1,700,000,000
Committee recommendation .....	1,700,000,000

The Committee recommends \$1,700,000,000 for fiscal year 2008 for the social services block grant. The amount is the same as the comparable fiscal year 2007 level and the budget request. The Committee rejects the administration's proposed bill language to lower the authorized funding level stipulated in section 2003(c) of the Social Security Act to \$1,200,000,000.

CHILDREN AND FAMILIES SERVICES PROGRAMS

Appropriations, 2007 .....	\$8,948,970,000
Budget estimate, 2008 .....	8,250,089,000
Committee recommendation .....	9,223,832,000

The Committee recommends \$9,223,832,000 for fiscal year 2008 for children and families services programs. The recommendation is \$274,862,000 above the comparable funding level for fiscal year 2007 and \$973,743,000 above the budget request. The recommendation includes \$10,500,000 in transfers available under section 241 of the Public Health Service Act.

This appropriation provides funding for programs for children, youth, and families, the developmentally disabled, and Native Americans, as well as Federal administrative costs.

*Head Start*

The Committee recommends \$7,088,571,000 for Head Start. This amount is \$200,000,000 above the comparable funding level for fiscal year 2007 and \$300,000,000 above the budget request. The Committee recommendation includes \$1,388,800,000 in advance funding that will become available on October 1, 2008.

Head Start provides comprehensive development services for low-income children and families that emphasize cognitive and language development, socioemotional development, physical and mental health, and parent involvement to enable each child to develop and function at his or her highest potential. At least 10 percent of enrollment opportunities in each State are made available to children with disabilities.

The Committee understands the serious need for additional and expanded Head Start facilities in rural areas and among Native American populations. The Committee believes that the Department could help serve these needy communities by providing minor construction funding, as authorized, in remote Native American communities.

The Committee is aware that the Migrant and Seasonal Head Start [MSHS] program was started in 1969 as a direct response to the unique needs of migrant farm workers and their families. In most States, local childcare resources are not available when migrant families come into a community, especially for infants and toddlers. Without childcare resources, parents have no choice but to take children to the fields where they are exposed to pesticides, hazardous equipment, extreme heat and other health dangers. MSHS programs serve approximately 38,000 children annually, operating in 40 States in every region of the country.

Since 2001, when the Department released a study documenting that only 19 percent of eligible children were able to access MSHS programs, the Committee has requested that the Secretary come forth with a plan for serving a larger proportion of eligible farm worker children. While the Committee was pleased that \$35,000,000 in fiscal year 2005 expansion funds were made available to serve additional migrant children, the Committee continues to be concerned that the needs of at risk migrant and seasonal farmworker children are not being adequately addressed. The Committee continues to look to the Secretary for a plan that describes how adequate systems are being put in place within the Department to ensure that children of migrant and seasonal farmworkers have adequate access to Head Start programs.

The Head Start Bureau shall continue to provide the Committee with the number and cost of buses purchased, by region with Head Start in the annual congressional budget justification.

#### *Consolidated Runaway and Homeless Youth Program*

The Committee recommends \$102,837,000 for the consolidated runaway and homeless youth program. This is \$15,000,000 above the comparable funding level for fiscal year 2007 and the budget request. This program was reauthorized under the Runaway, Homeless, and Missing Children Protection Act of 2003. In this reauthorization a statutory formula was established to distribute funds between the Basic Center Program and the Transitional Living Program.

This program addresses the crisis needs of runaway and homeless youth and their families through support to local and State governments and private agencies. Basic centers and transitional living programs provide services to help address the needs of some of the estimated 1.3 to 2.8 million runaway and homeless youth, many of whom are running away from unsafe or unhealthy living environments. These programs have been proven effective at lessening rates of family conflict and parental abuse, as well as increasing school participation and the employment rates of youth. The Committee notes that basic center grantees serve only a fraction of the youth who run away or are homeless. The Committee has provided funding above the request level to expand the number of basic centers and transitional living grantees so that more at-risk youth can be served.

The Committee is concerned that the Department has not published a report on promising strategies to end youth homelessness, as required by the Runaway, Homeless, and Missing Children Protection Act of 2003. The Committee urges the Secretary to release

this report to Congress within 6 months of the enactment of this act.

#### *Runaway Youth Prevention Program*

The Committee recommends \$20,027,000 for the runaway youth prevention program. This is \$5,000,000 above the comparable funding level for fiscal year 2007 and the budget request. This is a discretionary grant program open to private nonprofit agencies for the provision of services to runaway, homeless, and street youth. Funds may be used for street-based outreach and education, including treatment, counseling, provision of information, and referrals for these youths, many of whom have been subjected to, or are at risk of being subjected to, sexual abuse.

#### *Child Abuse Programs*

The Committee recommends \$107,175,000 for child abuse programs. The recommendation is \$11,958,000 above the comparable level for fiscal year 2007 and \$1,600,000 above the budget request. The recommendation includes \$27,007,000 for State grants, \$37,738,000 for discretionary activities, and \$42,430,000 for community-based child abuse prevention.

These programs seek to improve and increase activities at all levels of government which identify, prevent, and treat child abuse and neglect through State grants, technical assistance, research, demonstration, and service improvement.

The Committee has included funds for a nurse home visitation initiative as requested by the administration. These funds will encourage investment of existing Federal, State and local funding streams into evidence-based home visitation programs. The Committee notes that these programs have been shown not only to reduce child abuse and neglect, but also to increase employment, lower criminal activity, improve child health and contribute to child cognitive development.

The Committee expects that when implementing this program, ACF will adhere closely to effective nurse home visitation interventions as they were originally developed and evaluated. ACF should not expand these interventions to integrate other initiatives or services that could dilute the program.

Within the funds provided for child abuse discretionary activities, the Committee includes funding for the following items:

Project	Committee recommendation	Requested by
Boys and Girls Town of Missouri, St. James, MO, to expand services to abused and neglected children.	\$500,000	Bond
Catholic Community Services of Juneau, Juneau, AK, to continue operations at its Family Resource Center for child abuse prevention and treatment in Juneau, Alaska.	400,000	Stevens
Crisis Nursery of the Ozarks, Springfield, MO, for programming, equipment, services and curriculum.	200,000	Bond
Darkness to Light, Charleston, SC, to expand and disseminate the Stewards of Children program in consultation with the CARE House of Dayton, OH.	400,000	Brown
Young Women's Christian Association, Williamsport, PA, for abused and neglected children's CASA programs.	100,000	Specter

*Abandoned Infants Assistance*

The Committee recommends \$11,835,000 for abandoned infants assistance, which is the same as the comparable funding level for fiscal year 2007 and the budget request.

This program provides grants to public and private nonprofit agencies, State and county child welfare agencies, universities, and community-based organizations to develop, implement, and operate demonstration projects that will prevent the abandonment of infants and young children, especially those impacted by substance abuse and HIV and who are at-risk of being or are currently abandoned. By providing respite care for families and caregivers and assisting abandoned infants and children to reside with their natural families or in foster care.

*Child Welfare Services*

The Committee recommends \$286,754,000 for child welfare services. This is the same as the comparable funding level for fiscal year 2007 and the budget request.

This program helps State public welfare agencies improve their child welfare services with the goal of keeping families together. State services include: preventive intervention so that, if possible, children will not have to be removed from their homes; reunification so that children can return home; and development of alternative placements like foster care or adoption if children cannot remain at home. These services are provided without regard to income.

*Child Welfare Training*

The Committee recommends \$7,335,000 for child welfare services. This is the same as the comparable funding level for fiscal year 2007 and the budget request.

Under section 426, title IV-B of the Social Security Act, discretionary grants are awarded to public and private nonprofit institutions of higher learning to develop and improve education/training programs and resources for child welfare service providers. These grants upgrade the skills and qualifications of child welfare workers.

*Adoption Opportunities*

The Committee recommends \$26,848,000 for adoption opportunities, which is the same as the comparable funding level for fiscal year 2007 and the budget request.

This program eliminates barriers to adoption and helps find permanent homes for children who would benefit by adoption, particularly children with special needs.

*Adoption Incentives*

The Committee recommends \$9,500,000 for adoption incentives. The recommendation is \$4,500,000 above the comparable funding level for fiscal year 2007 and \$4,000,000 below the budget request.

The purpose of this program is to provide incentive funds to States to encourage an increase in the number of adoptions of children from the public foster care system. The appropriation allows

incentive payments to be made for adoptions completed prior to September 30, 2008.

#### *Adoption Awareness*

The Committee recommends \$12,674,000 for adoption awareness, which is the same as the comparable funding level for fiscal year 2007 and the budget request. This program consists of two activities: the infant adoption awareness training program and the special needs awareness campaign.

The infant adoption awareness training program provides grants to train health centers staff serving pregnant women so that they can inform them about adoption and make referrals on request to adoption agencies. Within the Committee recommendation, \$9,728,000 is available for this purpose.

The special needs adoption campaign supports grants to carry out a national campaign to inform the public about the adoption of children with special needs. The Committee recommendation includes \$2,946,000 to continue this important activity.

#### *Compassion Capital Fund*

The Committee recommends \$53,625,000 for the compassion capital fund [CCF], which is \$10,725,000 below the comparable funding level for fiscal year 2007 and \$21,375,000 below the budget request. The goal of this program is to help faith-based and community organizations maximize their social impact as they provide services to those most in need. The CCF administers three discretionary grant programs: a demonstration program which provides funding to intermediary organizations to provide training and technical assistance to smaller faith and community-based organizations; a program to fund capacity-building activities; and a program to build the capacity of organizations that combat gang activity and youth violence.

The Committee is concerned that the compassion capital fund has yet to demonstrate its effectiveness and for this reason has not provided funding for new grants. A program assessment ratings tool [PART] review conducted in 2006 gave the program a rating of "Results Not Demonstrated." In addition, the Committee notes that the program lacks baseline data for its performance measures and therefore it is not possible to determine the CCF's effectiveness. The Committee understands that ACF is conducting a multi-year evaluation of the program to be completed in 2008. The Committee will consider funding increases for the program when the results of the evaluation are available.

#### *Social Services Research*

The Committee recommends \$11,825,000 for social services research. The comparable funding level for fiscal year 2007 is \$11,868,000 and the budget request is \$5,880,000.

The Committee recommendation includes \$6,000,000 in transfers available under section 241 of the Public Health Service Act. These funds support research and evaluation projects focusing on finding programs that are cost effective, that increase the economic independence of American families and that contribute to healthy development of children and youth.

The Committee is aware of the dramatic increase in multiracial and multiethnic individuals and families in the United States today that present a unique social and demographic environment for the development of a knowledge base to expand and assess public policies that affect the wellbeing of multiethnic individuals and families. The Committee recommends the agency provide full and fair consideration of research proposals for this purpose.

Within the funds provided for social services research, the Committee includes funding for the following items:

Project	Committee recommendation	Requested by
A+ For Abstinence, Waynesboro, PA, for abstinence education and related services.	\$30,000	Specter
Abyssinian Development Corporation, New York, NY, to support and expand youth and family displacement prevention programs.	150,000	Clinton, Schumer
Alaska Children's Services, Anchorage, AK, for its program to serve low income youth in Anchorage, Alaska.	250,000	Stevens
Alaska Statewide Independent Living Council, Inc., Anchorage, AK, to continue and expand the Personal Care Attendant Program and to expand outreach efforts to the disabled living in rural Alaska.	200,000	Stevens, Murkowski
Anna Maria College, Paxton, MA, the Molly Bish Center for the Protection of Children and the Elderly.	100,000	Kennedy, Kerry
Boston Medical Center, Boston, MA, the Children's AIDS project .....	210,000	Kennedy, Kerry
Catholic Family Center, Rochester, NY, for kinship care outreach .....	250,000	Clinton, Schumer
Catholic Social Services, Wilkes-Barre, PA, for abstinence education and related services.	45,000	Specter
Child Care Resource and Referral Network, Tacoma, WA, for a child care quality initiative.	1,000,000	Murray
Children's Home Society of Idaho, Boise, ID, for the Bridge Project to place Idaho children-in-care in foster care.	250,000	Craig
City of Chester, Bureau of Health, Chester, PA, for abstinence education and related services.	35,000	Specter
Community Partnership for Children, Inc., Silver City, NM, for a child care quality initiative.	200,000	Bingaman
Community Services for Children, Inc., Allentown, PA, for early childhood development services.	100,000	Specter
Connecticut Council of Family Service Agencies, Wethersfield, CT, for the Empowering People for Success (EPS) initiative.	400,000	Dodd, Lieberman
Crozer Chester Medical Center, Upland, PA, for abstinence education and related services.	35,000	Specter
Family Center of Washington County, Montpelier, VT, to support and expand youth services.	500,000	Leahy
Family Service & Childrens Aid Society, Oil City, PA, for abstinence education and related services.	30,000	Specter
Fathers and Families Center, Indianapolis, IN, for supportive services for fathers.	100,000	Bayh
Friends Association for Care and Protection of Children, West Chester, PA, for programs to provide safe, secure housing for children through an emergency shelter for families, transitional housing, specialized foster care and adoption programs.	100,000	Specter
Guidance Center, Ridgeway, PA, for abstinence education and related services.	30,000	Specter
Heart Beat, Millerstown, PA, for abstinence education and related services .....	45,000	Specter
Horizons for Homeless Children, Boston, MA, for mentoring, educational, and social development programs.	190,000	Kennedy, Kerry
Keystone Central School District, Mill Hall, PA, for abstinence education and related services.	40,000	Specter
Keystone Economic Development Corporation, Johnstown, PA, for abstinence education and related services.	40,000	Specter
LaSalle University, Philadelphia, PA, for abstinence education and related services.	55,000	Specter
Mercy Hospital of Pittsburgh, Pittsburgh, PA, for abstinence education and related services.	55,000	Specter
My Choice, Inc., Athens, PA, for abstinence education and related services .....	25,000	Specter

Project	Committee recommendation	Requested by
Neighborhood United Against Drugs, Philadelphia, PA, for abstinence education and related services.	45,000	Specter
New Brighton School District, New Brighton, PA, for abstinence education and related services.	35,000	Specter
Northeast Guidance Center, Detroit, MI, for the Family Life Center project .....	250,000	Levin, Stabenow
Northwest Family Services, Alva, OK, to establish behavioral health services and family counseling programs.	100,000	Inhofe
Nueva Esperanza, Philadelphia, PA, for abstinence education and related services.	35,000	Specter
Partners for Healthier Tomorrows, Ephrata, PA, for abstinence education and related services.	25,000	Specter
Pennsylvania Coalition Against Domestic Violence, Harrisburg, PA, for domestic violence programs.	100,000	Specter
Positively Kids, Las Vegas, NV, to create a program to provide home, respite, and medical day care for severely-disabled children.	100,000	Reid
Progressive Believers Ministry, Wynmoor, PA, for abstinence education and related services.	30,000	Specter
Real Commitment, Gettysburg, PA, for abstinence education and related services.	55,000	Specter
School District of Philadelphia, Philadelphia, PA, for abstinence education and related services.	45,000	Specter
Shepherd's Maternity House, Inc., East Stroudsburg, PA, for abstinence education and related services.	30,000	Specter
Southend Community Services, Inc., Hartford, CT, for social outreach services to grandparents raising teenagers.	250,000	Dodd, Lieberman
Tuscarora Intermediate Unit, McVeytown, PA, for abstinence education and related services.	45,000	Specter
Urban Family Council, Philadelphia, PA, for abstinence education and related services.	80,000	Specter
Washington Hospital Teen Outreach, Washington, PA, for abstinence education and related services.	45,000	Specter
Women's Care Center of Erie County, Inc., Erie, PA, for abstinence education and related services.	45,000	Specter
York County Human Life Services, York, PA, for abstinence education and related services.	45,000	Specter

### *Developmental Disabilities*

The Committee recommends \$190,836,000 for programs administered by the Administration on Developmental Disabilities. The recommendation is \$20,001,000 above the comparable funding level for fiscal year 2007 and \$20,000,000 above the budget request. Within the funds provided, \$174,116,000 is for carrying out the Developmental Disability Act, and \$16,720,000 is for carrying out the Help America Vote Act of 2002.

The Administration on Developmental Disabilities [ADD] supports community-based delivery of services which promote the rights of persons of all ages with developmental disabilities. Developmental disability is defined as severe, chronic disability attributed to mental or physical impairments manifested before age 22, which causes substantial limitations in major life activities. The ADD also provides funding for election assistance for individuals with disabilities. This program is for individuals with any type of disability.

Of the funds provided, the Committee recommends \$77,271,000 for State councils. These councils assist each State in promoting the development of a comprehensive, statewide, consumer and family-centered system which provides a coordinated array services for individuals with development disabilities. State councils undertake

a range of activities including demonstration of new approaches, program and policy analysis, interagency collaboration and coordination, outreach and training.

The Committee recommends \$42,718,000 for protection and advocacy grants. This formula grant program provides funds to States to establish protection and advocacy systems to protect the legal and human rights of persons with developmental disabilities who are receiving treatment, services, or rehabilitation.

The Committee recommends \$16,720,000 for disabled voter services. Of these funds, \$11,390,000 is to promote disabled voter access, and the remaining \$5,330,000 is for disabled voters protection and advocacy systems. The election assistance for individuals with disabilities program was authorized in the Help America Vote Act of 2002. The program enables grantees to make polling places more accessible and increase participation in the voting process of individuals with disabilities.

The Committee recommends \$15,414,000 for projects of national significance to assist persons with developmental disabilities. This program funds grants and contracts that develop new technologies and demonstrate innovative methods to support the independence, productivity, and integration into the community of persons with developmental disabilities.

The Committee has included \$2,000,000 within its recommendation for a National Clearinghouse and Technical Assistance Center with local projects in as many States as funds permit. This Center will promote leadership by families of children with disabilities in the design and improvement of family-centered and family-controlled systems of family support services, as described in Section 202(b)(2) of the Families of Children with Disabilities Support Act of 2000. The Committee intends these funds to supplement, not supplant existing funding for family support activities within the projects of national significance account.

The Committee recommends \$38,713,000 for the University Centers for Excellence in Developmental Disabilities [UCEDDs], a network of 67 centers that are interdisciplinary education, research and public service units of a university system or are public or non-profit entities associated with universities. The Centers serve as the major vehicle to translate disability-related research into community practice and to train the next cohort of future professionals who will provide services and supports to an increasingly diverse population of people with disabilities. The Committee recommendation provides an increase of \$5,501,000 above the comparable fiscal year 2007 level, which will fund the existing centers at their authorized level, allow them to receive a modest cost of living adjustment and support additional training for critical and emerging national needs, such as autism spectrum disorder.

#### *Native American Programs*

The Committee recommends \$49,332,000 for Native American programs. This is \$5,000,000 above the comparable funding level for fiscal year 2007 and the budget request.

The Administration for Native Americans [ANA] assists Indian tribes and Native American organizations in planning and implementing long-term strategies for social and economic development

through the funding of direct grants for individual projects, training and technical assistance, and research and demonstration programs.

The Committee is aware that Native American languages are in rapid decline in this country and that only 20 of the nearly 300 languages originally spoken in America are still being used by Native youth today. The Esther Martinez Native American Languages Preservation Act was passed by Congress last year for the purpose of halting and reversing this alarming trend. In addition to increasing language fluency, Native language immersion programs have additional benefits: evidence suggests they may decrease Native dropout rates and increase educational attainment among Native youth. The Committee is extremely supportive of this effort and has included \$5,000,000 in its recommendation to support Native language immersion and other revitalization programs.

#### *Community Services*

The Committee recommends \$735,281,000 for the community services programs. The recommendation is \$40,707,000 above the comparable funding level for fiscal year 2007 and \$710,829,000 above the budget request.

Within the funds provided, the Committee recommends \$670,425,000 for the community services block grant [CSBG], which is \$40,000,000 above the comparable fiscal year 2007 funding level. The administration did not request funding for this program. These funds are used to make formula grants to States and Indian tribes to provide a wide range of services and activities to alleviate causes of poverty in communities and to assist low-income individuals in becoming self-sufficient.

Several other discretionary programs are funded from this account. Funding for these programs is recommended at the following levels for fiscal year 2008: community economic development, \$32,404,000; individual development accounts, \$24,452,000; and rural community facilities, \$8,000,000.

The Committee is aware that the Government Accountability Office [GAO] has found severe deficiencies in the Office of Community Services' [OCS] oversight of the CSBG. A GAO review found that OCS lost 2 year's worth of key documents relating to State monitoring visits, sent monitoring teams without the necessary financial expertise to States, and did not use performance data or audit findings to target its monitoring resources toward high risk States. The review also found that training and technical assistance funds were used to support Federal staff in OCS and that 60 percent of the funding was used for a variety of grants unrelated to assisting local agencies with problems. The GAO reported OCS has ignored the Committee's direction from the fiscal year 2005 appropriations conference report to implement a training and technical assistance needs assessment and delivery plan in consultation with CSBG State and local eligible entities.

The Committee believes the Secretary must make better use of funds reserved for training and technical assistance by ensuring that the funds are provided solely to State grantees, local eligible entities, or their State, regional, and national associations for the purpose of expanding their capacity to achieve the purposes of the

act effectively. While some share of these resources should be available to assist State and local agencies to correct deficiencies, the primary purpose of such funding should be to build the organizational and programmatic resources needed to reduce poverty and rebuild communities. The Committee believes that this funding is not intended for support of Federal administrative expenses.

The Committee directs that OCS report to the Committee the results of training and technical activities at the end of each grant period. Funding for fiscal year 2008 should support, but not be limited to, a system for rating the quality and effectiveness of training and technical assistance activities and providers; a program of technical assistance for establishing and assessing voluntary local agency benchmarks for high performance; and a system for providing effective responses to needs identified by monitoring or corrective action plans.

#### *Domestic Violence Hotline*

The Committee recommends \$3,200,000 for the national domestic violence hotline. The comparable funding level for fiscal year 2007 is \$2,970,000, as is the budget request.

This activity funds the operation of a national, toll-free, 24-hours-a-day telephone hotline to provide information and assistance to victims of domestic violence.

#### *Battered Women's Shelters*

The Committee recommends \$127,000,000 for fiscal year 2008 for battered women's shelters program. This amount is \$2,269,000 above both the comparable funding level for fiscal year 2007 and the budget request.

These funds support community-based projects which operate shelters and provide related assistance for victims of domestic violence and their dependents. Emphasis is given to projects which provide counseling, advocacy, and self-help services to victims and their children.

#### *Mentoring Children of Prisoners*

The Committee recommends \$49,493,000 for mentoring children of prisoners, which is the same as the comparable funding level for fiscal year 2007. The administration requested \$50,000,000 for this activity.

The mentoring children of prisoners program was authorized in 2001 under section 439 of the Social Security Act. The purpose of this program is to keep children connected to a parent in prison in order to increase the chances that the family will come together successfully when the parent is released. As a group, children of prisoners are less likely than their peers to succeed in school and more likely to become engaged in delinquent behavior.

#### *Independent Living Training Vouchers*

The Committee recommends \$46,157,000 for independent living training vouchers, which is the same as the comparable funding level for fiscal year 2007 and the budget request.

These funds will support vouchers of up to \$5,000 for college tuition, or vocational training for individuals who age out of the foster

care system so they can be better prepared to live independently and contribute productively to society. Studies have shown that 25,000 youths leave foster care each year at age 18. In addition, only 50 percent will have graduated from high school, whereas 52 percent will be unemployed and 25 percent will be homeless for one or more nights.

#### *Abstinence Education*

The Committee recommends \$84,916,000 for community-based abstinence education. This is \$28,484,000 below the comparable funding level for fiscal year 2007 and \$56,248,000 below the administration request. The recommendation includes \$4,500,000 in transfers available under section 241 of the Public Health Service Act.

The Committee notes that the Department's recent multi-year, experimentally designed evaluation of abstinence-only education programs funded under title V of the Social Security Act found that they had no effect on the sexual abstinence of youth. The Committee notes that community based abstinence education programs have been required to share the same eight statutory elements as programs funded under title V. In light of this evaluation, the Committee has not provided funding for the administration's proposed increase or for the national abstinence media campaign. The Committee recommendation fully funds current grantee continuation costs.

The Committee firmly supports the goal of delaying sexual activity and preventing teen pregnancy among youth. However, the Committee believes that the Department must encourage further innovation in abstinence education programs in order to develop effective, evidence-based interventions. Until abstinence programs can demonstrate sizeable and lasting impacts, the Committee does not believe that new funding is warranted.

The Committee is disturbed by reports that grantee materials in this program may not contain scientifically accurate information. The Committee has included bill language clarifying that funds provided under this program must be scientifically accurate as required by Federal law.

#### *Faith-Based Center*

The Committee recommends \$1,386,000 for the operation of the Department's Center for Faith-Based and Community Initiatives. This amount is the same as the comparable funding level for fiscal year 2007 and the budget request.

#### *Program Administration*

The Committee recommends \$197,225,000 for program administration. This is \$9,449,000 above the comparable funding level for fiscal year 2007 and is the same as the budget request.

The Committee recommendation includes an additional \$6,200,000 to expand the agency's improper payments activities to establish error rates for the temporary assistance for needy families [TANF] and child care programs, as well as for foster care administrative costs. The Committee believes that the agency's efforts to minimize improper payments are particularly important given

that the TANF and child care programs total approximately \$34,000,000,000 in Federal and State funds annually. The Committee notes that previous ACF program integrity efforts have achieved over \$600,000,000 in savings in Head Start and the foster care program.

PROMOTING SAFE AND STABLE FAMILIES

Appropriations, 2007 .....	\$434,100,000
Budget estimate, 2008 .....	434,100,000
Committee recommendation .....	434,100,000

The Committee recommends \$434,100,000 for promoting safe and stable families, which is the same as the comparable funding level for fiscal year 2007 and the budget request. The promoting safe and stable families program is comprised of \$345,000,000 in capped entitlement funds authorized by the Social Security Act and \$89,100,000 in discretionary appropriations

Funds available through the promoting safe and stable families program are focused on supporting those activities that can prevent family crises from emerging which might require the temporary or permanent removal of a child from his or her own home. The program provides grants to States, territories, and tribes for provision of four broad categories of services to children and families: (1) family preservation services; (2) time-limited family reunification services; (3) community-based family support services; and (4) adoption promotion and support services. The Child and Family Services Improvement Act (Public Law 109-288) allocated \$40,000,000 for formula grants to States to support monthly caseworker visits to children in foster care and for competitive grants to regional partnerships to address child welfare issues raised by parent or caretaker abuse of methamphetamine or other substance.

PAYMENTS TO STATES FOR FOSTER CARE AND ADOPTION ASSISTANCE

Appropriations, 2007 .....	\$4,912,000,000
Budget estimate, 2008 .....	5,067,000,000
Committee recommendation .....	5,067,000,000

The Committee recommends \$5,067,000,000 for payments to States for foster care and adoption assistance. The comparable funding level for fiscal year 2007 is \$4,912,000,000. In addition, the Committee recommendation provides \$1,776,000,000 for an advance appropriation for the first quarter of fiscal year 2009. The Committee recommendation provides the full amount requested under current law.

The foster care program provides Federal reimbursement to States for: Maintenance payments to families and institutions caring for eligible foster children, matched at the Federal medical assistance percentage [FMAP] rate for each State; administration and training costs to pay for the efficient administration of the foster care program; and training of foster care workers and parents.

The adoption assistance program provides funds to States for maintenance costs and the nonrecurring costs of adoption for children with special needs. The goal of this program is to facilitate the placement of hard-to-place children in permanent adoptive homes, and thus prevent long, inappropriate stays in foster care. As in the

foster care program, State administrative and training costs are reimbursed under this program.

The independent living program provides services to foster children under 18 and foster youth ages 18–21 to help them make the transition to independent living by engaging in a variety of services including educational assistance, life skills training and health services. States are awarded grants from the annual appropriation proportionate to their share of the number of children in foster care, subject to a matching requirement.

#### ADMINISTRATION ON AGING

Appropriations, 2007 .....	\$1,383,007,000
Budget estimate, 2008 .....	1,335,146,000
Committee recommendation .....	1,441,585,000

The Committee recommends an appropriation of \$1,441,585,000 for aging programs. This amount is \$58,578,000 above the comparable fiscal year 2007 level and \$106,439,000 above the administration request.

#### *Supportive Services and Senior Centers*

The Committee recommends an appropriation of \$350,595,000 for supportive services and senior centers, which is the same as the comparable fiscal year 2007 level and the administration request. This State formula grant program funds a wide range of social services for the elderly, including multipurpose senior centers, adult day care, and ombudsman activities. State agencies on aging award funds to designated area agencies on aging who in turn make awards to local services providers. All individuals age 60 and over are eligible for services, although, by law, priority is given to serving those who are in the greatest economic and social need, with particular attention to low-income minority older individuals, older individuals with limited english proficiency, and older individuals residing in rural areas. Under the basic law, States have the option to transfer up to 30 percent of funds appropriated between the senior centers program and the nutrition programs, which allows the State to determine where the resources are most needed.

#### *Preventive Health Services*

The Committee recommends \$21,400,000 for preventive health services, which is the same as the comparable fiscal year 2007 level. The administration did not request funds for this activity. Funds appropriated for this program are part of the comprehensive and coordinated service systems targeted to those elderly most in need. Preventive health services include nutritional counseling and education, exercise programs, health screening and assessments, and prevention of depression.

#### *Protection of Vulnerable Older Americans*

The Committee recommends \$21,156,000 for grants to States for protection of vulnerable older Americans. This is \$1,000,000 above the comparable fiscal year 2007 level and \$1,990,000 above the administration request. Within the Committee recommendation, \$16,010,000 is for the ombudsman services program and \$5,146,000

is for the prevention of elder abuse program. Both programs provide formula grants to States to prevent the abuse, neglect, and exploitation of older individuals. The ombudsman program focuses on the needs of residents of nursing homes and board and care facilities, while elder abuse prevention targets its message to the elderly community at large.

#### *National Family Caregiver Support Program*

The Committee recommends \$156,167,000 for the national family caregiver support program, which is the same as comparable fiscal year 2007 level and \$1,980,000 above the administration request. Funds appropriated for this activity establish a multifaceted support system in each State for family caregivers. All States are expected to implement the following five components into their program: information to caregivers about available services; assistance to caregivers in gaining access to services; caregiver counseling, training and peer support; respite care to enable caregivers to be temporarily relieved from their caregiving responsibilities; and limited supplemental services that fill remaining service gaps.

The Committee recognizes the essential role of family caregivers who provide a significant proportion of our Nation's health and long-term care for the chronically ill and aging. While caring for a loved one can be rewarding, it may also put caregivers at risk for negative physical and mental health consequences. The Committee acknowledges the efforts of the Administration on Aging [AoA] to provide vital support services for family caregivers through the national family caregiver support program. The Committee encourages increased support of services that may prevent or reduce the health burdens of caregiving, including individual counseling, support groups, respite care, and caregiver training.

#### *Native American Caregiver Support Program*

The Committee recommendation includes \$6,428,000 to carry out the Native American caregiver support program. This amount is \$187,000 above the comparable fiscal year 2007 level and the administration request. The program will assist tribes in providing multifaceted systems of support services for family caregivers and for grandparents or older individuals who are relative caregivers.

#### *Congregate and Home-delivered Nutrition Services*

For congregate nutrition services, the Committee recommends an appropriation of \$418,519,000 which is \$19,600,000 above the comparable fiscal year 2007 level and \$35,118,000 above the administration request. For home-delivered meals, the Committee recommends \$197,805,000 which is \$9,500,000 above the comparable fiscal year 2007 level and \$16,807,000 above the administration request. These programs address the nutritional needs of older individuals. Projects funded must make home-delivered and congregate meals available at least once a day, 5 days a week, and each meal must meet a minimum of one-third of daily dietary requirements. While States receive separate allotments of funds for congregate and home-delivered nutrition services and support services, they are permitted to transfer up to 40 percent of funds between these programs.

The Committee is aware that proper nutrition is essential to the health and wellness of older Americans. A healthy diet can prevent weakness and frailty, improve resistance to illness and disease, and lead to better management of chronic health problems. All of these in turn lead to greater independence and quality of life for older persons.

The recent reauthorization of the Older Americans Act recognized the important role that nutrition plays in promoting the health and well-being of seniors. In addition to reducing hunger and promoting socialization, the nutrition services program was reauthorized with the purpose of assisting older Americans in accessing nutrition and other disease promotion services that can delay the onset of adverse health conditions. The act also added greater emphasis on nutrition education, nutrition counseling and other nutrition services.

Despite increased recognition of nutrition's importance to the health and well-being of our seniors, the funding level for the nutrition services program has stagnated in recent years, while at the same time the population of older Americans continues to increase. The Committee notes that the number of meals provided under the nutrition services program has declined by more than 8 percent from fiscal years 2000 to 2005. The Committee is aware that flat funding, along with higher food and transportation costs, has forced many programs to implement waiting lists and consolidate meal sites in order to cut costs. The Committee hopes that the funding increase provided will help alleviate the fiscal strain affecting these programs and will allow them to continue to provide meals services that are essential to our seniors.

The Committee recognizes that the recent reauthorization of the Older Americans Act (Public Law 109-365) continues to allow States to transfer funds between title III-B, which funds supportive services, and title III-C, which provides funding for nutrition services. While such transfers have remained relatively stable over time, amounting to approximately \$35,000,000 per year transferred from nutrition programs to supportive services, the Committee is concerned by the decrease of funds available for nutrition services. The Committee believes that the specific funding increase provided for nutrition services in this bill should be used to directly support, facilitate, or foster nutrition programs, and should not be transferred for non-nutrition-related supportive services.

#### *Nutrition Services Incentives Program*

The Committee recommendation includes \$157,246,000 for the nutrition services incentives program [NSIP], \$9,400,000 above the comparable fiscal year 2007 funding level and \$10,136,000 above the administration request. This program augments funding for congregate and home-delivered meals provided to older adults. Funds provided under this program are dedicated exclusively to the provision of meals. NSIP rewards effective performance by States and tribal organizations in the efficient delivery of nutritious meals to older individuals through the use of cash or commodities.

*Aging Grants to Indian Tribes and Native Hawaiian Organizations*

The Committee recommends \$27,834,000 for grants to Native Americans, which is \$1,700,000 above the comparable fiscal year 2007 funding level and the administration request. Under this program awards are made to tribal and Alaskan Native organizations and to public or nonprofit private organizations serving native Hawaiians which represent at least 50 percent Indians or Alaskan Natives 60 years of age or older to provide a broad range of supportive services and assure that nutrition services and information and assistance are available.

*Program Innovations*

The Committee recommends \$11,420,000 for program innovations, which is \$12,638,000 below above the comparable fiscal year 2007 level and \$24,065,000 below the administration request. These funds support activities designed to expand public understanding of aging and the aging process, apply social research and analysis to improve access to and delivery of services for older individuals, test innovative ideas and programs to serve older individuals, and provide technical assistance to agencies that administer the Older Americans Act.

The Committee has provided funding for the choices for independence initiative in aging network support activities, rather than in program innovations as proposed by the administration.

Recognizing that Alzheimer's disease often causes patients to exhibit unusual and unpredictable behavior, the AoA supports a 24-hour call center to provide family caregivers with professional care consultation and crisis intervention through a national network of community-based organizations. The Committee has provided \$1,000,000 to continue this valuable program.

The Committee continues to support funding at no less than last year's level for national programs scheduled to be refunded in fiscal year 2008 that address a variety of issues, including elder abuse, Native American issues, and legal services.

*Vision Loss.*—The Committee applauds the AoA and CMS' aging and disability resource center [ADRC] program which supports State efforts to develop one-stop shop programs at the community level to provide information on the range of services and options available to older Americans as well as streamlined access to publicly funded benefits. The Committee supports the inclusion of vision loss information among the array of services offered by the ADRCs so that the needs of older Americans with vision loss are addressed.

The Committee includes the following projects and activities and the following amounts for fiscal year 2008:

Project	Committee recommendation	Requested by
Coalition of Wisconsin Aging Groups, Madison, WI, to conduct outreach and education for law enforcement and financial industry on financial elder abuse.	\$200,000	Kohl
Disability Rights Wisconsin, Madison, WI, for nursing home support services ....	185,000	Kohl
Good Samaritan Village of Hastings, Sioux Falls, SD, for the continuation of the Sensor Technology Project for Senior Independent Living and Home Health.	100,000	Hagel

Project	Committee recommendation	Requested by
Jewish Family & Child Services, Portland, Oregon, for seniors programs and services at a Naturally Occurring Retirement Community.	100,000	Smith
Jewish Family and Children's Service of Greater Philadelphia, PA, for Naturally Occurring Retirement Community.	100,000	Specter
Jewish Family Service of New Mexico, Albuquerque, NM, to support a Naturally Occurring Retirement Communities (NORC) demonstration project.	300,000	Domenici, Bingaman
Jewish Family Services of Delaware, Wilmington, DE, for a Naturally Occurring Retirement Community.	200,000	Biden, Carper
Jewish Federation of Greater Atlanta, GA, for a Naturally Occurring Retirement Community.	100,000	Chambliss
Jewish Federation of Greater Indianapolis, IN, for a Naturally Occurring Retirement Community.	750,000	Bayh, Lugar
Jewish Federation of Las Vegas, NV, for the Las Vegas Senior Lifeline Program.	500,000	Reid
Nevada Rural Counties RSVP, Carson City, NV, to provide home services to seniors in rural areas.	100,000	Reid
UJA Federation of Northern New Jersey, River Edge, NJ, for a Naturally Occurring Retirement Community.	200,000	Lautenberg, Menendez
United Jewish Federation of Greater Pittsburgh, PA, for a Naturally Occurring Retirement Community.	100,000	Specter

### *Aging Network Support Activities*

The Committee recommends \$42,651,000 for aging network support activities, \$29,518,000 above both the comparable amount for fiscal year 2007 and the administration request. The Committee recommendation includes funding at the administration request level for the Eldercare Locator, which is a toll-free, nationwide directory assistance service for older Americans and their caregivers. Since 1991, the service has linked more than 700,000 callers to an extensive network of resources for aging Americans and their caregivers.

The Committee recommendation includes \$28,000,000 to begin national implementation of the choices for independence program. The Committee has provided funding for this program in aging network support activities, as reflected in the reauthorized Older Americans Act. The administration requested these funds within the program innovations activity. The choices for independence program will seek to establish long-term care options for seniors so they can live independently in their own communities. The program will continue and expand existing AoA programs that focus on nursing home diversion, aging and disability resource centers and evidence-based disease prevention activities.

The Committee has included \$1,000,000 within aging network support activities for the establishment of a National Center on Senior Benefits Outreach and Enrollment, which was included in the reauthorization of the Older American Act. Studies show that, even after decades of outreach efforts, large percentages of older Americans who are eligible for important public benefits are not receiving them. Officials estimate that up to 4.4 million low-income beneficiaries are eligible for, but not receiving, low-income subsidies [LIS] under the Medicare Part D prescription drug benefit. It is the Committee's intent that this new Center would work closely with the aging network, as well as state health insurance assistance programs [SHIPs], the Centers for Medicare and Medicaid Services [CMS], the Social Security Administration [SSA] and other

Federal agencies to utilize cost-effective strategies to find and enroll those seniors with greatest economic need. The Committee has also included \$500,000 in CMS and \$1,000,000 in SSA for this purpose.

The Committee recommendation includes \$1,676,000 for the pension counseling and information program. Regional pension counseling projects provide hands-on personalized advice to workers, retirees and their family members about employer sponsored pension and retirement savings plan benefits, and assistance in pursuing claims when problems arise. The program has secured nearly \$75,000,000 in benefits for the thousands of clients it has served—a return on Federal investment of more than five to one. Hundreds of thousands more have benefited from the program’s outreach and information efforts. The Committee’s recommendation includes funds to increase support for the counseling projects and expand the number of regional counseling projects from five to six.

The Committee has provided funding at the administration request level for the National Long Term Care Ombudsman Resource Center, the National Center on Elder Abuse and the Health Care Anti-Fraud, Waste and Abuse Program.

*Alzheimer’s Disease Demonstration Grants to States*

The Committee recommends a funding level of \$11,668,000 for Alzheimer’s disease demonstration grants to States, which is the same as the comparable fiscal year 2007 funding level. The administration proposed eliminating funding for this activity.

An estimated 70 percent of Americans with Alzheimer’s disease live at home, where family members provide the preponderance of care. The Alzheimer’s disease demonstration grant program currently supports matching grants to 38 States to help stimulate and coordinate services to assist families caring for Alzheimer patients, particularly those living in underserved rural communities and minorities. In light of the unique demands Alzheimer’s disease places on families and States, the Committee has provided sufficient funds to continue this program at its current level.

*Program Administration*

The Committee recommends \$18,696,000 for program administration, which is \$311,000 above the comparable fiscal year 2007 funding level and the same as the administration request. These funds support salaries and related expenses for program management and oversight activities.

OFFICE OF THE SECRETARY

GENERAL DEPARTMENTAL MANAGEMENT

Appropriations, 2007 .....	\$356,238,000
Budget estimate, 2008 .....	392,556,000
Committee recommendation .....	405,237,000

The Committee recommends \$405,237,000 for general departmental management [GDM]. This amount includes \$4,000,000 for the Secretary’s discretionary fund. The Committee recommendation includes the transfer of \$5,851,000 from Medicare trust funds, which is the same as the administration request. In addition, for

policy evaluation activities the Committee recommends \$46,756,000 in transfers available under section 241 of the Public Health Service Act.

This appropriation supports those activities that are associated with the Secretary's role as policy officer and general manager of the Department. It supports certain health activities performed by the Office of Public Health and Science, including the Office of the Surgeon General. GDM funds also support the Department's centralized services carried out by several Office of the Secretary staff divisions, including personnel management, administrative and management services, information resources management, inter-governmental relations, legal services, planning and evaluation, finance and accounting, and external affairs.

The Office of the Surgeon General, in addition to its other responsibilities, provides leadership and management oversight for the PHS Commissioned Corps, including the involvement of the Corps in departmental emergency preparedness and response activities.

The Committee directs that specific information requests from the chairman and ranking member of the Subcommittee on Labor, Health and Human Services, and Education, and Related Agencies, on scientific research or any other matter, shall be transmitted to the Committee on Appropriations in a prompt professional manner and within the timeframe specified in the request. The Committee further directs that scientific information requested by the Committees on Appropriations and prepared by Government researchers and scientists be transmitted to the Committee on Appropriations, uncensored and without delay.

The Committee has included \$30,000,000 for the transformation of the Commissioned Corps. The Committee commends the Secretary on his proposal to transform the Public Health Service Commissioned Corps into a force that is ready to respond to public health emergencies and looks forward to working with him on this important initiative.

The Committee has also included \$9,500,000 for the Latin American health initiative which will focus on training health care workers in Central and South America. The Committee has held hearings on global health issues, drug-resistant tuberculosis, and pandemic influenza and understands that infectious diseases know no borders. While the United States has provided strong financial support for the elimination of HIV/AIDS, tuberculosis, and malaria across the world, the Committee understands that these efforts cannot succeed without a basic public health infrastructure in place. The Committee believes that this health diplomacy initiative will address that goal by giving local residents the training they need to provide basic health care in Latin America.

Bill language is included to provide HHS the authority to work with non governmental organizations in the provision of medical services. Section 215 of the General Provisions is also modified so that the State Department can provide the same embassy personnel, space, and logistics services to the Health Diplomacy Initiative that it provides to CDC.

The Committee has included \$1,000,000 for the Secretary to implement section 399CC of the Public Health Service Act (as enacted

in the Combating Autism Act, Public Law 109–416) related to creation and administration of the Interagency Autism Coordinating Committee.

The Committee recognizes the importance of rebuilding the health care delivery system in Louisiana following hurricanes Katrina and Rita in 2005 and encourages the Department of Health and Human Services to work with the State of Louisiana to rebuild a redesigned, properly funded health care system for its citizens. Barriers to expanded access and choice to the medically uninsured low-income population should be eliminated. Recognizing the failings and poor health outcomes of the State's two-tier delivery system, the Committee encourages HHS to continue working with Louisiana on the development of a waiver for more flexible use of Federal match DSH dollars to ensure more expanded access to community and private providers to the state's low-income population. To combat the growing pandemic and public health emergency associated with HIV/AIDS, the Committee urges the Department and NIH to review the range of approaches available to addressing liability concerns for the administration and clinical testing of an HIV/AIDS vaccine.

*Preterm Birth.*—The Committee has provided sufficient funding to convene a Surgeon General's conference on preterm birth and produce a report establishing a public-private agenda to speed the identification of and treatments for the causes and risk factors for preterm labor and delivery.

*Food Allergies.*—Approximately 2 million school-aged children in the United States suffer from food allergy, for which there is no cure. Allergic reactions in children often occur in the school setting and can develop into severe anaphylactic shock that can kill within minutes unless epinephrine is administered. It is estimated that 94 percent of the Nation's schools have students with food allergy, and the incidence is increasing. The Committee encourages the Department to work with the Department of Education and knowledgeable private sector organizations on the development of guidelines for the management of children with food allergy as well as a plan to disseminate and publicize these guidelines to local educational agencies and youth organizations.

*Chronic Fatigue Syndrome.*—The Committee appreciates the work of the Department's Chronic Fatigue Syndrome Advisory Committee [CFSAC], especially the August 30, 2006 renewal of its charter and the personal participation of the Assistant Secretary for Health in recent meetings. The Committee encourages the CFSAC to prioritize strategies to address the low rate of diagnosis of CFS and lack of defined standards of medical care for CFS patients and the stagnation in research funding by CDC and NIH in spite of progress being demonstrated in the field.

*Sleep Disorders.*—At NIH's Frontiers of Knowledge in Sleep and Sleep Disorders conference in March 2004, the U.S. Surgeon General reported on the profound impact that chronic sleep loss and untreated sleep disorders have on Americans of all ages. The public health model is well suited to translate these essential health messages to society. The Committee continues to urge the Surgeon General to develop a Surgeon General's Report on Sleep and Sleep

Disorders and requests report regarding progress made on this initiative.

The Committee includes the following projects and activities and in the following amounts for fiscal year 2008:

Project	Committee recommendation	Requested by
Community Transportation Association of America, Washington, DC, for TA to human services transportation providers on ADA requirements.	\$1,000,000	Harkin
Palmer College on Chiropractic, Consortial Center for Chiropractic Research in Davenport, Iowa, and the Policy Institute for Integrative Medicine in Philadelphia, PA for a best practices initiative on lower back pain.	400,000	Harkin

#### *Adolescent Family Life*

The Committee has provided \$30,307,000 for the Adolescent Family Life Program [AFL], which is the same as the comparable fiscal year 2007 level.

The AFL program funds demonstration projects that provide services to pregnant and parenting adolescents, and prevention projects which promote abstinence from sexual activity for adolescents.

#### *Minority Health*

The Committee recommends \$49,475,000 for the Office of Minority Health, which is \$3,980,000 below the comparable level for fiscal year 2007.

The Office of Minority Health [OMH] focuses on strategies designed to decrease the disparities and to improve the health status of racial and ethnic minority populations in the United States. OMH establishes goals, and coordinates all departmental activity related to improving health outcomes for disadvantaged and minority individuals. OMH supports several initiatives, including demonstration projects (the Minority Community Health Partnership HIV/AIDS, the Bilingual/Bicultural Service, and the Youth Empowerment Program) as well as the Center for Linguistic and Cultural Competency in Health Care, and the Family and Community Violence Prevention Program.

The Committee is encouraged by the progress the Office of Minority Health is making in fiscal year 2007 on the multi-year effort to address health disparities issues in the gulf coast region, and looks forward to further progress in this area in fiscal year 2008.

The Committee continues to support cooperative partnerships between OMH and our Nation's historically black medical schools to impact ongoing opportunities and challenges in health disparities and training which these institutions are uniquely positioned to address.

The Committee includes the following projects and activities and in the following amounts for fiscal year 2008:

Project	Committee recommendation	Requested by
Saint Francis Hospital, Wilmington, DE, to expand prenatal, maternity, pediatric, and other primary care services to indigent populations.	\$700,000	Biden, Carper

*Office on Women's Health*

The Committee recommends \$30,369,000 for the Office on Women's Health. This is \$3,000,000 above the comparable level for fiscal year 2007.

The Office on Women's Health [OWH] develops, stimulates, and coordinates women's health research, health care services, and public and health professional education and training across HHS agencies. It advances important crosscutting initiatives and develops public-private partnerships, providing leadership and policy direction, and initiating and synthesizing program activities to redress the disparities in women's health.

The Committee understands that lupus is a serious, complex, debilitating chronic autoimmune disease that can cause inflammation and tissue damage to virtually any organ system in the body and impacts an estimated one to two million individuals. The Committee further understands that public and health professional recognition and understanding of lupus is extremely low, contributing to misdiagnoses or late diagnoses that can result in disability or death. The Committee has included sufficient funds for the Office of Women's Health to work with the advocacy community to develop and implement a sustained lupus awareness and education campaign aimed at reaching health care professionals and the general public, with an emphasis on reaching women at greatest risk for developing lupus.

The Committee has included \$1,000,000 for a study by the Institute of Medicine which would comprehensively review the status of women's health research, summarize what we have learned about the how diseases specifically effect woman, and report back to Congress suggestions for the direction of future research.

*HIV/AIDS in Minority Communities*

To address high-priority HIV prevention and treatment needs of minority communities heavily impacted by HIV/AIDS, the Committee recommends \$51,891,000. This amount is the same as the fiscal year 2007 level. These funds are available to key operating divisions of the Department with capability and expertise in HIV/AIDS services to assist minority communities with education, community linkages, and technical assistance.

*Afghanistan*

The Committee recommendation includes \$5,941,000 for the Secretary's Afghanistan health initiative. Funds will be used in partnership with the Department of Defense for medical training activities at the Rabia Balkhi Women's Hospital in Kabul, and for support of maternal and child health throughout Afghanistan.

*Embryo Donation and Adoption*

The Committee continues to believe that increasing public awareness of embryo donation and adoption remains an important goal. The Committee has provided \$4,000,000 for the Department's embryo donation and adoption awareness activities, which is \$2,020,000 more than the comparable fiscal year 2007 funding level. The Committee notes that the costs associated with embryo adoption may be hindering people from participating in embryo

adoption. The Committee is aware that the medical procedures involved can be expensive and are not always successful. To address these challenges, the Committee has included bill language allowing funds appropriated for embryo adoption activities to be available to pay medical and administrative costs deemed necessary to facilitate embryo donations and adoptions.

OFFICE OF MEDICARE HEARINGS AND APPEALS

Appropriations, 2007 .....	\$59,727,000
Budget estimate, 2008 .....	70,000,000
Committee recommendation .....	70,000,000

The Committee provides \$70,000,000 for the Office of Medicare Hearings and Appeals, which is \$10,273,000 above the comparable fiscal year 2007 level.

The Office of Medicare Hearings and Appeals is responsible for hearing Medicare appeals at the administrative law judge level, which is the third level of Medicare claims appeals. This office began to process Medicare appeals in 2005. Prior to that time, appeals had been processed by the Social Security Administration under an interagency agreement with the Centers for Medicare and Medicaid Services. This function was transferred to the Office of the Secretary by the Medicare Prescription Drug, Improvement and Modernization Act of 2003.

OFFICE OF THE NATIONAL COORDINATOR FOR HEALTH INFORMATION TECHNOLOGY

Appropriations, 2007 .....	\$61,302,000
Budget estimate, 2008 .....	117,872,000
Committee recommendation .....	71,000,000

The Committee provides \$71,000,000 to the Office of the National Coordinator for Health Information Technology [ONC]. This amount is \$9,698,000 above the comparable fiscal year 2007 level. The Committee recommendation includes \$28,000,000 in transfers available under section 241 of the Public Health Service Act.

The Office of The National Coordinator for Health Information Technology is responsible for promoting the use of electronic health records in clinical practice, coordinating Federal health information systems and collaborating with the private sector to develop standards for a nationwide interoperable health information technology infrastructure.

OFFICE OF INSPECTOR GENERAL

Appropriations, 2007 .....	\$215,378,000
Budget estimate, 2008 .....	241,105,000
Committee recommendation .....	242,105,000

The Committee recommends an appropriation of \$242,105,000 for the Office of Inspector General [OIG], which is \$1,000,000 above the administration request. In addition to discretionary funds provided in this act, the Health Insurance Portability and Accountability Act of 1996 and the Deficit Reduction Act of 2005 both contain permanent appropriations for the Office of Inspector General. The total funds provided to the OIG from this bill and other permanent appropriations are \$196,418,000 in fiscal year 2008.

The Office of Inspector General conducts audits, investigations, and evaluations, of the programs administered by the Department of Health and Human Services Operating and Staff Divisions, including the recipients of HHS's grant and contract funds. In doing so, the OIG addresses issues of waste, fraud, and abuse and makes recommendations to improve the efficiency and effectiveness of HHS programs and operations.

As part of its emphasis on fraud and abuse activities, the Committee has increased funding for the OIG over the budget request. This office's oversight of HHS health care programs from fiscal year 2004 to fiscal year 2006 resulted in a return on investment of approximately \$12 for every \$1 spent on IG activities, with total expected recoveries reaching \$2,700,000,000.

#### OFFICE FOR CIVIL RIGHTS

Appropriations, 2007 .....	\$34,909,000
Budget estimate, 2008 .....	37,062,000
Committee recommendation .....	37,062,000

The Committee recommends \$37,062,000 for the Office for Civil Rights [OCR], which is the same as the Administration's request. The recommendation includes the transfer of \$3,314,000 from the Medicare trust funds.

The Office for Civil Rights is responsible for enforcing civil rights-related statutes in health care and human services programs. To enforce these statutes, OCR investigates complaints of discrimination, conducts program reviews to correct discriminatory practices, and implements programs to generate voluntary compliance among providers and constituency groups of health and human services.

#### RETIREMENT PAY AND MEDICAL BENEFITS FOR COMMISSIONED OFFICERS

Appropriations, 2007 .....	\$370,698,000
Budget estimate, 2008 .....	402,542,000
Committee recommendation .....	402,542,000

The Committee provides an estimated \$402,542,000 for retirement pay and medical benefits for commissioned officers of the U.S. Public Health Service, the same as the administration request.

This account provides for: retirement payments to U.S. Public Health Service officers who are retired for age, disability, or length of service; payments to survivors of deceased officers; medical care to active duty and retired members and dependents and beneficiaries; and for payments to the Social Security Administration for military service credits.

#### PUBLIC HEALTH AND SOCIAL SERVICES EMERGENCY FUND

Appropriations, 2007 .....	\$717,320,000
Budget estimate, 2008 .....	1,753,737,000
Committee recommendation .....	1,699,556,000

The Committee provides \$1,699,556,000 to the Public Health and Social Services Emergency Fund. The Pandemic Preparedness and All-Hazards Preparedness Act, enacted into law in December, 2006,

created the new position of the Assistant Secretary for Preparedness and Response.

This appropriation supports the activities of the Office of the Assistant Secretary for Preparedness and Response and other activities within the Office of the Secretary to prepare for the health consequences of bioterrorism and other public health emergencies, including pandemic influenza and to support the Department's cybersecurity efforts.

#### *Hospital Preparedness*

The Committee's recommendation includes \$438,843,000 for hospital preparedness grants, a decrease of \$35,151,000 below the comparable fiscal year 2007 level. This program was transferred from the Health Resources Services Administration in 2007.

The Committee's recommendation includes \$25,000,000 to continue the state-of-the-art mass casualty emergency care demonstration proposed in the Hospital Preparedness fiscal year 2007 budget request and funded in the fiscal year 2007 joint funding resolution.

The Committee believes that progress has been made in improving the preparedness of the Nation's trauma centers to address the consequences of a possible future terrorist attack or natural disaster, but that a greater level of preparedness must be achieved. The recently-enacted Pandemic and All Hazards Preparedness Act recognized the importance of increasing the response capabilities of the nation's trauma centers. Consistent with this, the Committee urges the Secretary to emphasize improvements in this area.

According to a September 2006, report entitled "U.S. Trauma Center Preparedness for a Terrorist Attack" (funded by the Centers for Disease Control), an assessment of 175 trauma centers found an overall preparedness level of 74 percent. The report found that Level I trauma centers were more likely to score above average in preparedness than Level II centers, that preparedness (and supporting funding) correlated well with proximity to large numbers of hazardous sites (especially sites that could trigger mass decontamination requirements), and that funding through the National Bioterrorism Hospital Preparedness Program had resulted in high levels of emergency planning preparedness. However, the report also found significant variations in decontamination and surge capacity, often inadequate planning and preparation for prolonged operations in a "siege" environment, the absence of health care resource capacity monitoring, the absence of adequate preparedness for special needs populations, and the need for broader implementation of mutual aid agreements (MAAs) to include cross credentialing.

The Committee strongly urges the Secretary to review these recommendations and to incorporate them into the Hospital Preparedness Cooperative Agreement Grants Program, including through providing support for local partnerships.

#### *Advanced Research and Development*

The Committee recommendation includes \$159,000,000 for advanced research and development, an increase of \$60,000,000 over the fiscal year 2007 level.

*Other Preparedness and Response Activities*

The Committee recommendation includes \$158,713,000 for other preparedness and response activities within the Office of the Assistant Secretary for Preparedness and Response, the Office of the Assistant Secretary for Resources and Technology, and the Office of Public Health and Science, and the Office of the Secretary.

Within the Office of the Assistant Secretary for Preparedness and Response, those activities include:

- \$53,000,000 for the national disaster medical systems, the same level as the request. This activity was funded by the Department of Homeland Security in fiscal year 2007.
- \$22,363,000 for BioShield management, the same level as the request. This activity was funded in fiscal year 2007 by CDC under the appropriation for the strategic national stockpile.
- \$6,000,000 for the emergency systems for advance registration of volunteer health professionals. This program was transferred from the Health Resources Services Administration in 2007.

The Committee recommendation includes \$9,482,000 for the Office of the Chief Information officer for information technology cyber-security, the same as the fiscal year 2007 level.

The Committee recommendation includes \$14,113,000 for the medical reserve corps program, which is \$1,000,000 less than the request.

The Committee realizes that managing a possible a multi-pronged strategy involving the procurement of vaccines, antibiotics, and post-exposure prophylaxis/therapies. HHS has a goal to procure enough vaccine to inoculate 25 million people and up to 200,000 anthrax therapies. To date, however, HHS has stockpiled 10 million doses of existing vaccine and 30,000 anthrax treatments. The Committee requests that the Department report to the Committee on their plans to protect the country in the case of an anthrax attack.

*Health Care Credentialing*

The Committee recommendation includes \$3,300,000 for Healthcare provider Credentialing and Security and improvement activities within the Office of the Secretary.

*World Trade Center*

The Committee recognizes the importance of addressing the short and long-term health needs of those individuals that were exposed to the environmental hazards released as a result of the September 11, 2001 attacks upon the World Trade Center, and affirms the commitment of the Federal Government to provide assistance to those whose physical and mental health was adversely impacted as a result of this exposure.

The Committee has provided \$55,000,000 for treatment, screening, and monitoring activities and has provided bill language which directs the Secretary to transfer these funds to the National Institute for Occupational Safety and Health. The Committee intends that the NIOSH not only fund existing grantees but to also to provide funding to entities that would provide services to building and construction trade workers, residents, office and commercial work-

ers, volunteers, students, and other individuals that were exposed to the environmental hazards released as a result of the September 11, 2001 attacks upon the World Trade Center

More than 5 years after the attacks, persistent health effects have been documented among residents, rescue and recovery workers, such as asthma, chronic sinusitis, and gastrointestinal conditions. Post-traumatic stress disorder [PTSD], anxiety, depression, and other health effects have also been diagnosed among many of those that have been exposed. The Committee encourages the development of a long-term, comprehensive solution to screen and monitor all individuals who were exposed to the environmental hazards at the World Trade Center [WTC] site following the terrorist attacks on September 11, 2001 and provide comprehensive medical services for those experiencing illnesses or injuries as a result of these exposures.

#### *Pandemic Influenza Preparedness*

The Committee recommendation includes \$888,000,000 for pandemic influenza preparedness activities. Of this amount, \$652,000,000, to be available until expended, is for activities including purchase of pre-pandemic vaccine for stockpiling, vaccine development, the purchase of antivirals and the research and development of diagnostic tests.

The Committee has led efforts to provide funding for pandemic flu preparedness and remains committed to preparing the Nation for the next pandemic. The Committee has provided \$652,000,000 of the \$870,000,000 requested for non-recurring pandemic influenza activities. This amount is based on two factors: (1) the \$5,620,000,000 thus far appropriated for these activities was done so with maximum flexibility to allow modifications to plans as technologies evolve and the pattern of avian flu spread becomes more apparent and (2) over \$2,600,000,000 of the funds thus far appropriated remain unobligated.

The Committee is aware of the Department's spending plans and does not intend to imply that the remaining balances are indicative of poor performance. However, given the remaining funds and attached flexibility, the case for providing these additional dollars in a regular appropriations bill is not strong. The funds provided by the Committee will ensure that the next steps in the Department's plan can be taken without impediment while ensuring adequate oversight by the Congress. The Committee requests monthly reports updating the status of actions taken and funds obligated.

The Committee has not specified how these no-year funds are to be used, and is broadly supportive of plans for vaccine development and purchase, antiviral procurement, and research and development of diagnostics. However, the Committee encourages HHS to identify new technologies that might have the potential to greatly enhance our response to a pandemic, and to be open to using the provided flexibility to make strategic investments in these potentially paradigm shifting technologies. Examples made known to the Committee include universal vaccines and passive immunotherapy. The Committee continues to support progress being made in influenza and pandemic viral vaccine selection and development. The Committee is aware of new technologies for rapid in vitro high

throughput immune response assessment that could accelerate vaccine protection against influenza and pandemic viruses and monitoring of vaccine efficacy, storage and distribution. The Committee encourages the Department and CDC to consider supporting the development of such technology.

Also within this amount, \$78,000,000 is for ongoing activities within the department including \$4,000,000 for communication activities, \$35,000,000 for pandemic preparedness and planning, \$15,000,000 for international activities, \$15,000,000 for the advanced development of rapid tests and \$9,000,000 for management and administration.

And also within this amount, \$158,000,000 is to be transferred to the Centers for Disease Control and Prevention within 30 days of enactment for ongoing pandemic influenza activities, including \$10,000,000 for quarantine stations; \$4,000,000 for human-animal interface studies; \$48,000,000 for international surveillance, diagnosis, and epidemic investigations; \$18,000,000 for rapid outbreak response in 15 targeted countries; \$20,000,000 for a library of pandemic reference strains; \$15,000,000 for a diagnostic reagent stockpile; \$10,000,000 for real-time assessment and evaluation of interventions; \$15,000,000 for the development of a vaccine registry to monitor vaccine use and distribution; and \$20,000,000 to fund States to increase annual influenza vaccine demand.

The Committee strongly encourages HHS and CDC to support public and professional education, media awareness and outreach programs, and pandemic influenza risk communication. These activities would increase seasonal vaccination rates, thereby lowering influenza-related deaths and hospitalizations. The Committee strongly encourages CDC and HHS to aggressively implement initiatives for increasing influenza vaccine demand to match the increased domestic vaccine production and supply resulting from pandemic preparedness funding. Developing a sustainable business model for vaccine production will go a long way toward making vaccine available when needed.

#### GENERAL PROVISIONS, DEPARTMENT OF HEALTH AND HUMAN SERVICES

The Committee recommendation continues a provision placing a \$50,000 ceiling on official representation expenses (sec. 201).

The Committee recommendation continues a provision which limits the assignment of certain public health personnel (sec. 202).

The Committee recommendation retains language regarding set-asides in the authorizing statute of the National Institutes of Health (sec. 203).

The Committee recommendation continues a provision limiting the use of grant funds to pay individuals no more than an annual rate of executive level I (sec. 204).

The Committee recommendation includes a provision limited the use of funds for Head Start to pay compensation of an individual in excess of executive level II (sec. 205).

The Committee recommendation continues a provision restricting the Secretary's use of taps for program evaluation activities unless a report is submitted to the Appropriations Committees on the proposed use of funds (sec. 206).

The Committee recommendation modifies a provision authorizing the transfer of up to 2.4 percent of Public Health Service funds for evaluation activities (sec. 207).

The Committee recommendation continues a provision restricting transfers of appropriated funds and requires a 15-day notification to both the House and Senate Appropriations Committees (sec. 208).

The Committee recommendation continues a provision permitting the transfer of up to 3 percent of AIDS funds among institutes and centers by the Director of NIH and the Director of the Office of AIDS Research at NIH (sec. 209).

The Committee recommendation retains language which requires that the use of AIDS research funds be determined jointly by the Director of the National Institutes of Health and the Director of the Office of AIDS Research and that those funds be allocated directly to the Office of AIDS Research for distribution to the institutes and centers consistent with the AIDS research plan (sec. 210).

The Committee recommendation continues a provision regarding requirements for family planning applicants (sec. 211).

The Committee recommendation retains language which restricts the use of funds to carry out the Medicare Advantage Program if the Secretary denies participation to an otherwise eligible entity (sec. 212).

The Committee recommendation retains language which states that no provider services under title X of the PHS Act may be exempt from State laws regarding child abuse (sec. 213).

The Committee recommendation retains language which prohibits the Secretary from withholding substance abuse treatment funds (sec. 214).

The Committee recommendation continues a provision which facilitates the expenditure of funds for international health activities (sec. 215).

The Committee recommendation includes a provision allowing the Division of Federal Occupational Health to use personal services contracting to employ professional, administrative, and occupational health professionals (sec. 216).

The Committee recommendation modifies a provision authorizing the Director of the National Institutes of Health to enter into certain transactions to carry out research in support of the NIH Common Fund (sec. 217).

The Committee includes a provision that permits the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry to transfer funds that are available for Individual Learning Accounts to "Disease Control, Research, and Training" (sec. 218).

The Committee recommendation includes bill language allowing use of funds to continue operating the Council on Graduate Medical Education (sec. 219).

The Committee recommendation modifies language pertaining to use of the Centers for Disease Control aircraft (sec. 220).

The Committee includes a provision pertaining to a new mandatory "public access" policy at the National Institutes of Health (sec. 221).

The Committee includes a provision which authorizes funding for the Delta Health Alliance (sec. 222).

The Committee recommendation includes a provision permitting the National Institutes of Health to use up to \$2,500,000 per project for improvements and repairs of facilities (sec. 223).

The Committee recommendation includes a provision that transfers funds from NIH to HRSA and AHRQ, to be used for National Research Service Awards (sec. 224).

TITLE III  
DEPARTMENT OF EDUCATION  
EDUCATION FOR THE DISADVANTAGED

Appropriations, 2007 .....	\$14,725,593,000
Budget estimate, 2008 .....	16,689,090,000
Committee recommendation .....	15,867,778,000

The Committee recommends an appropriation of \$15,867,778,000 for education for the disadvantaged. The comparable funding level for fiscal year 2007 was \$14,725,593,000 and the budget request includes \$16,689,090,000 for this account.

The programs in the Education for the Disadvantaged account help ensure that poor and low-achieving children are not left behind in the Nation’s effort to raise the academic performance of all children and youth. That goal is more pressing than ever since the passage of the No Child Left Behind Act, which incorporates numerous accountability measures into title I programs, especially part A grants to local educational agencies—the largest Federal elementary and secondary education program.

Funds appropriated in this account primarily support activities in the 2008–2009 school year.

*Grants to Local Educational Agencies*

Title I grants to local educational agencies [LEAs] provide supplemental education funding, especially in high-poverty areas, for local programs that provide extra academic support to help raise the achievement of eligible students or, in the case of schoolwide programs, help all students in high-poverty schools to meet challenging State academic standards. The program serves about 18 million students in nearly all school districts and more than half of all public schools—including two-thirds of the Nation’s elementary schools.

Title I schools help students reach challenging State standards through one of two models: “targeted assistance” that supplements the regular education program of individual children deemed most in need of special assistance, or a “schoolwide” approach that allows schools to use title I funds—in combination with other Federal, State, and local funds—to improve the overall instructional program for all children in a school.

States are required to reserve 4 percent of their allocation under this program for school improvement activities, unless such action would require a State to reduce the grant award of a local educational agency to an amount below the preceding year. States must distribute 95 percent of these reserved funds to local educational agencies for schools identified for improvement, corrective action, or restructuring. The Committee intends for States to uti-

lize these funds along with those available under the School Improvement Grants program to make competitive awards to school districts that are of sufficient size and scope, and of a multi-year duration, so that schools may undertake sustainable, scientifically based research reform activities that have a positive impact on improving instructional practices in the classroom.

Of the funds available for title I grants to LEAs, up to \$4,000,000 shall be available on October 1, 2007, not less than \$5,038,599,000 will become available on July 1, 2008, and \$8,867,301,000 will become available on October 1, 2008. The funds that become available on July 1, 2008, and October 1, 2008, will remain available for obligation until September 30, 2009.

Title I grants are distributed through four formulas: basic, concentration, targeted, and education finance incentive grant [EFIG].

Overall, the Committee recommends \$13,909,900,000, the same as the budget request, for title I grants. The fiscal year 2007 appropriated level was \$12,838,125,000. As in past years, the Committee divided the increase over fiscal year 2007 equally between the targeted and EFIG formulas, both of which direct a higher share of funds to poorer students than the basic and concentration formulas do. The budget request allocates all of the increase over fiscal year 2007 into the targeted account.

For title I basic grants, including up to \$4,000,000 transferred to the Census Bureau for poverty updates, the Committee recommends an appropriation of \$6,808,407,000. The comparable funding levels for basic grants for fiscal year 2007 and the budget request are both \$6,808,408,000. Basic grants are awarded to school districts with at least 10 poor children who make up more than 2 percent of enrollment.

For concentration grants, the Committee recommends an appropriation of \$1,365,031,000, the same as the comparable funding levels for fiscal year 2007 and the budget request. Funds under this program are distributed according to the basic grants formula, except that they go only to LEAs where the number of poor children exceeds 6,500 or 15 percent of the total school-aged population.

The targeted grants formula weights child counts to make higher payments to school districts with high numbers or percentages of poor students. For these grants, the Committee recommends an appropriation of \$2,868,231,000. The comparable funding level for fiscal year 2007 was \$2,332,343,000 and the budget request is \$3,466,618,000.

The Committee recommends an appropriation of \$2,868,231,000 to be allocated through the EFIG formula. The comparable funding level for fiscal year 2007 was \$2,332,343,000 and the budget request is \$2,269,843,000. The EFIG funding stream is allocated using State-level equity and effort factors that are intended to encourage States to improve the equity of their education funding systems.

#### *William F. Goodling Even Start Family Literacy Program*

The Committee does not recommend any funds for the Even Start program. The comparable funding level for fiscal year 2007 was \$82,283,000. The budget request does not include any funds for this program.

The Even Start program provides grants for family literacy programs that serve disadvantaged families with children under 8 years of age and adults eligible for services under the Adult Education and Family Literacy Act. Programs combine early childhood education, adult literacy, and parenting education. Funding is provided to States based on their relative share of title I, part A funds, and States use these resources to make competitive subgrants to partnerships comprised of local educational agencies and other organizations serving families in high-poverty areas.

#### *School Improvement Grants*

The Committee recommendation includes \$500,000,000, the same as the budget request, for the school improvement grants program. This program was funded for the first time in fiscal year 2007, at \$125,000,000. The School Improvement Grants program was authorized as part of the No Child Left Behind Act to support a formula grant program to States that will enable them to provide assistance to schools not making adequate yearly progress for at least 2 years. Under the authorized program, States are required to allocate not less than 95 percent of their awards to schools to enable them to, among other things, develop and implement their school improvement plans (which may include research-based activities such as comprehensive school reform, professional development for teachers and staff, and extended learning opportunities.)

When subgranting these funds to LEAs, the Committee strongly urges the Secretary to inform States that they are required to make awards of sufficient size and scope to undertake activities required by sections 1116 and 1117 of NCLB, integrate these grant funds with other resources awarded by the States under this act (particularly, the 4 percent school improvement set-aside), and give priority to those LEAs with the lowest-achieving schools that demonstrate the greatest need for school improvement funding and the strongest commitment to ensuring that such funds are used to provide adequate resources to enable the lowest-performing schools to meet the goals identified in improvement plans, correction action, and restructuring plans under section 1116 of NCLB.

The Committee requests that the fiscal year 2009 congressional justification include specific information about the actions taken to support the Committee's intention in providing resources for this program and other school improvement activities and steps the Department will take to collect evidence on the outcomes achieved with school improvement funds.

#### *Reading First State Grants*

The Committee recommends \$800,000,000 for the Reading First State Grants program. The comparable funding level for fiscal year 2007 was \$1,029,234,000. The budget request is \$1,018,692,000.

Reading First is a comprehensive effort to provide States and LEAs with funds to implement comprehensive reading instruction for children in grades K-3, to help ensure that every child can read by the end of third grade.

The funding cut recommended by the Committee is in direct response to the Education Department's egregious mismanagement of the program, as described in six reports by the Inspector General,

numerous media accounts and congressional hearings. The Committee notes that Reading First was long touted by the administration as a model education program that awarded grants solely on the basis of solid scientific research and effectiveness. The Committee responded by providing more than \$5,000,000,000 for the program over the past 5 years, as the administration requested.

Regrettably, it became clear that the Department and its contractors frequently ignored evidence of effectiveness while promoting certain programs that were favored by a few key individuals, some of whom had a financial interest in the programs' success. In addition, Department officials flouted the No Child Left Behind Act by interfering in State and local decisions regarding the selection of reading curricula. The Committee appreciates the Department's expressed willingness to correct its mistakes and restore the public's trust in its ability to administer Reading First. In the meantime, however, the Committee does not believe it would be appropriate to maintain funding for the program at its current level.

#### *Early Reading First*

The Committee recommends \$117,666,000, the same as the budget request and the fiscal year 2007 appropriation, for the Early Reading First program.

Early Reading First complements Reading First State Grants by providing competitive grants to school districts and nonprofit groups to support activities in existing preschool programs that are designed to enhance the verbal skills, phonological awareness, letter knowledge, pre-reading skills, and early language development of children ages 3 through 5. Funds are targeted to communities with high numbers of low-income families.

#### *Striving Readers*

The Committee recommends \$36,000,000 for the Striving Readers initiative. The comparable fiscal year 2007 funding level was \$31,870,000 and the budget request is \$100,000,000. This program supports grants to develop, implement, and evaluate reading interventions for middle or high school students reading significantly below grade level. Under this program, awards are made to local educational agencies eligible to receive funds under part A of title I with one or more high schools or middle schools serving a significant number of students reading below grade level. Awards also may be made to partnerships including institutions of higher education and eligible nonprofit or for-profit organizations.

#### *Math Now*

The Committee recommendation does not include any funding for the proposed Math Now for Elementary School Students or Math Now for Middle School Students initiatives. The budget request for each program is \$125,000,000. The purpose of both programs is to raise student achievement in math. The Committee notes that it already funds the mathematics and science partnerships program, and is recommending a small increase for it.

*Improving Literacy Through School Libraries*

The Committee recommends \$23,000,000 for the Improving Literacy Through School Libraries program. The fiscal year 2007 appropriation was \$19,485,000, the same amount as the budget request.

This program provides funds for urgently needed, up-to-date school library books and training for school library media specialists. LEAs with a child-poverty rate of at least 20 percent are eligible for the competitive awards. Funds may be used to acquire school library media resources, including books and advanced technology; facilitate resource-sharing networks among schools and school libraries; provide professional development for school library media specialists; and provide students with access to school libraries during nonschool hours.

*Promise Scholarships*

The Committee recommendation does not include any funding for the proposed Promise Scholarships program. The budget request is \$250,000,000. This program would provide students from low-income families who are enrolled in persistently low-performing schools with scholarships that they can use to pay tuition, fees and other costs to attend private or out-of-district schools, or to purchase supplemental educational services.

*Opportunity Scholarships*

The Committee recommendation does not include any funding for the proposed Opportunity Scholarships program. The budget request is \$50,000,000. This program would provide competitive grants to enable students from low-income households who attend a school identified for improvement, corrective action or restructuring under the No Child Left Behind Act to attend private or out-of-district schools, or to purchase supplemental educational services.

*Migrant Education Program*

The Committee recommends \$386,524,000, the same as the fiscal year 2007 appropriation, for the migrant education program. The budget request is \$380,295,000.

The title I migrant education program authorizes grants to State educational agencies for programs to meet the special educational needs of the children of migrant agricultural workers and fishermen. Funds are allocated to the States through a statutory formula based on each State's average per-pupil expenditure for education and actual counts of migratory children ages 3 through 21 residing within the States in the previous year. Only migratory children who have moved within the last 3 years are generally eligible to be counted and served by the program.

This appropriation also supports activities to improve interstate and intrastate coordination of migrant education programs, as well as identifying and improving services to the migrant student population.

*Neglected and Delinquent*

The Committee recommends \$49,797,000, the same as the fiscal year 2007 appropriation and the budget request, for the title I neglected and delinquent program.

This program provides financial assistance to State educational agencies for education services to neglected and delinquent children and youth in State-run institutions and for juveniles in adult correctional institutions. Funds are allocated to individual States through a formula based on the number of children in State-operated institutions and per-pupil education expenditures for the State.

States are authorized to set aside at least 15 percent, but not more than 30 percent, of their neglected and delinquent funds to help students in State-operated institutions make the transition into locally operated programs and to support the successful re-entry of youth offenders, who are age 20 or younger and have received a secondary school diploma or its recognized equivalent. Re-entry activities may include strategies designed to expose the youth to, and prepare the youth for, postsecondary education, or vocational and technical training programs.

*Evaluation*

The Committee recommends \$9,330,000, the same as the fiscal year 2007 appropriation, for evaluation of title I programs. The budget request is \$9,327,000.

Evaluation funds are used to support large-scale national surveys that examine how the title I program is contributing to student academic achievement. Funds also are used to evaluate State assessment and accountability systems and analyze the effectiveness of educational programs supported with title I funds.

*Comprehensive School Reform Demonstration*

The Committee includes \$1,634,000 for the comprehensive school reform demonstration program. The comparable funding level for fiscal year 2007 was \$2,352,000. The budget request did not include any funds for this program. The Committee recommendation is sufficient to pay the continuation costs of the Comprehensive School Reform Clearinghouse.

*High School Equivalency Program*

The Committee recommends \$18,550,000, the same as the fiscal year 2007 appropriation and the budget request, for the high school equivalency program [HEP].

This program provides 5-year grants to institutions of higher education and other nonprofit organizations to recruit migrant students ages 16 and over and provide the academic and support services needed to help them obtain a high school equivalency certificate and subsequently gain employment, win admission to a postsecondary institution or a job-training program, or join the military. Projects provide counseling, health services, stipends, and placement assistance.

*College Assistance Migrant Program*

For the College Assistance Migrant Program [CAMP], the Committee recommends \$15,377,000, the same amount as the fiscal year 2007 appropriation and the budget request.

Funds provide 5-year grants to institutions of higher education and nonprofit organizations for projects that provide tutoring, counseling, and financial assistance to migrant students during their first year of postsecondary education. Projects also may use up to 10 percent of their grants for follow-up services after students have completed their first year of college, including assistance in obtaining student financial aid.

IMPACT AID

Appropriations, 2007 .....	\$1,228,453,000
Budget estimate, 2008 .....	1,228,100,000
Committee recommendation .....	1,248,453,000

The Committee recommends an appropriation of \$1,248,453,000 for impact aid. The comparable funding level for fiscal year 2007 was \$1,228,453,000, and the budget request is \$1,228,100,000.

Impact aid provides financial assistance to school districts for the costs of educating children when enrollments and the availability of revenues from local sources have been adversely affected by the presence of Federal activities. Children who reside on Federal or Indian lands generally constitute a financial burden on local school systems because these lands do not generate property taxes—a major revenue source for elementary and secondary education in most communities. In addition, realignments of U.S. military forces at bases across the country often lead to influxes of children into school districts without producing the new revenues required to maintain an appropriate level of education.

The Committee bill retains language that provides for continued eligibility for students affected by the deployment or death of their military parent, as long as these children still attend the same school district.

*Basic Support Payments.*—The Committee recommends \$1,111,867,000 for basic support payments. The comparable funding level for fiscal year 2007 was \$1,091,867,000, the same as the budget request. Under this statutory formula, payments are made on behalf of all categories of Federally connected children, with a priority placed on making payments first to heavily impacted school districts and providing any remaining funds for regular basic support payments.

*Payments for Children with Disabilities.*—The Committee bill includes \$49,466,000, the same as the budget request and the fiscal year 2007 appropriation, for payments for children with disabilities. Under this program, additional payments are made for certain Federally connected children eligible for services under the Individuals with Disabilities Education Act.

*Facilities Maintenance.*—The Committee recommends \$4,950,000, the same as the fiscal year 2007 appropriation, for facilities maintenance. The budget request is \$4,597,000. This activity provides funding for emergency repairs and comprehensive capital improvements to certain school facilities owned by the Department of Edu-

cation and used by local educational agencies to serve federally connected military dependent students. Funds appropriated for this purpose are available until expended.

*Construction.*—The Committee recommends \$17,820,000, the same as the fiscal year 2007 appropriation and the budget request, for this program. Formula and competitive grants are authorized to be awarded to eligible LEAs for emergency repairs and modernization of school facilities. Funds appropriated for the construction activity are available for obligation for a period of 2 years.

The fiscal year 2006 and 2007 appropriations for this activity stipulated that funds were to be used only on formula construction grants to eligible school districts. The budget request proposes bill language this year to provide construction funds on a competitive basis only. The Committee has provided this requested authority.

*Payments for Federal Property.*—The Committee recommends \$64,350,000, the same as the budget request and the fiscal year 2007 appropriation, for this activity. These payments compensate local educational agencies in part for revenue lost due to the removal of Federal property from local tax rolls. Payments are made to LEAs that have a loss of tax base of at least 10 percent of assessed value due to the acquisition since 1938 of real property by the U.S. Government.

SCHOOL IMPROVEMENT PROGRAMS

Appropriations, 2007 .....	\$5,255,478,000
Budget estimate, 2008 .....	4,698,276,000
Committee recommendation .....	5,198,525,000

The Committee recommends an appropriation of \$5,198,525,000 for school improvement programs. The comparable funding level in fiscal year 2007 was \$5,255,478,000, and the budget request is \$4,698,276,000.

*State Grants for Improving Teacher Quality*

The Committee recommends \$2,887,439,000, the same as the fiscal year 2007 appropriation, for State grants for improving teacher quality. The budget request is \$2,787,488,000.

The appropriation for this program primarily supports activities associated with the 2008–2009 academic year. Of the funds provided, \$1,452,439,000 will become available on July 1, 2008, and \$1,435,000,000 will become available on October 1, 2008. These funds will remain available for obligation until September 30, 2009.

States and LEAs may use the funds for a range of activities related to the certification, recruitment, professional development, and support of teachers and administrators. Activities may include reforming teacher certification and licensure requirements, addressing alternative routes to State certification of teachers, recruiting teachers and principals, and implementing teacher mentoring systems, teacher testing, merit pay, and merit-based performance systems. These funds may also be used by districts to hire teachers to reduce class sizes.

*Early Childhood Educator Professional Development*

The Committee recommends \$14,550,000, the same as the fiscal year 2007 appropriation, to support professional development ac-

tivities for early childhood educators and caregivers in high-poverty communities. The budget did not request any funds for this program. From this appropriation, the Secretary makes competitive grants to partnerships of early childhood and family literacy caregivers and educators in order to provide high-quality, sustained and intensive professional development for early childhood educators to help them provide developmentally appropriate school-readiness services for preschool-age children.

#### *Mathematics and Science Partnerships*

The Committee recommends \$184,000,000 for the mathematics and science partnerships program. The fiscal year 2007 appropriation was \$182,160,000, and the budget request is \$182,124,000. These funds will be used to improve the performance of students in the areas of math and science by bringing math and science teachers in elementary and secondary schools together with scientists, mathematicians, and engineers to increase the teachers' subject-matter knowledge and improve their teaching skills. When the appropriation for this program is \$100,000,000 or greater, the Secretary is authorized to award grants to States by a formula which includes consideration of the number of children aged 5 to 17 below the poverty line. States then are required to make grants competitively to eligible partnerships to enable the entities to pay the Federal share of the costs of developing or redesigning more rigorous mathematics and science curricula that are aligned with State and local standards; creating opportunities for enhanced professional development that improves the subject-matter knowledge of math and science teachers; recruiting math and science majors; and improving and expanding training of math and science teachers, including the effective integration of technology into curricula and instruction.

#### *Innovative Education Program Strategies State Grants*

The Committee does not recommend any funding for innovative education program strategies State grants. Neither does the budget request. The comparable funding level for fiscal year 2007 was \$99,000,000.

The innovative education program is a flexible source of Federal funds that provides support to States and LEAs for developing education reform initiatives that will improve the performance of students, schools, and teachers.

#### *Educational Technology State Grants*

The Committee recommends \$272,250,000, the same as the fiscal year 2007 appropriation, for educational technology State grants. The budget request did not include any funds for this program.

The educational technology State grants program supports efforts to integrate technology into curricula to improve student learning. Funds flow by formula to States and may be used for the purchase of hardware and software, teacher training on integrating technology into the curriculum, and efforts to use technology to improve communication with parents, among other related purposes. An LEA must use at least 25 percent of its formula allocation for professional development in the integration of technology into the cur-

ricula unless it can demonstrate that it already provides such high-quality professional development.

Under the No Child Left Behind Act, States may use up to 5 percent of their award for technical assistance and administrative expenses and then must distribute 50 percent of remaining funds based on a formula and 50 percent based on a grant competition. However, the Committee bill includes language allowing States to award up to 100 percent of their funds competitively.

#### *Supplemental Education Grants*

The Committee recommendation includes \$18,001,000, the same as the budget request and the fiscal year 2007 appropriation, for supplemental education grants to the Republic of Marshall Islands and the Federated States of Micronesia. This grant program was authorized by the Compact of Free Association Amendments Act of 2003. These funds will be transferred from the Department of Education to the Secretary of the Interior for grants to these entities. The Committee bill includes language that allows up to 5 percent to be used by the FSM and RMI to purchase oversight and technical assistance, which may include reimbursement of the Departments of Labor, Health and Human Services and Education for such services.

#### *21st Century Community Learning Centers*

The Committee recommends an appropriation of \$1,000,000,000 for the 21st Century Community Learning Centers program. The fiscal year 2007 appropriation was \$981,166,000, and the budget request is \$981,180,000.

Funds are allocated to States by formula, which in turn, award at least 95 percent of their allocations to local educational agencies, community-based organizations and other public and private entities. Grantees use these resources to establish or expand community learning centers that provide activities offering significant extended learning opportunities, such as before- and after-school programs, recreational activities, drug and violence prevention and family literacy programs for students and related services to their families. Centers must target their services on students who attend schools that are eligible to operate a schoolwide program under title I of the Elementary and Secondary Education Act or serve high percentages of students from low-income families.

#### *State Assessments and Enhanced Assessment Instruments*

The Committee recommends \$416,000,000 for State assessments and enhanced assessment instruments. The fiscal year 2007 appropriation was \$407,563,000, and the budget request was \$411,630,000.

This program has two components. The first provides formula grants to States to pay the cost of developing standards and assessments required by the No Child Left Behind Act.

Under the second component—grants for enhanced assessment instruments—appropriations in excess of the “trigger level” (which is \$400,000,000 in fiscal year 2008) are used for a competitive grant program designed to support efforts by States to improve the quality and fairness of their assessment systems. The Committee

recommendation for the second component is \$16,000,000, compared with the fiscal year 2007 appropriation of \$7,563,000. The Committee recommends increased funding for this activity as part of its initiative to improve the implementation of the No Child Left Behind Act.

The Committee continues to be concerned that many schools are unable to properly assess the performance of limited-English proficient students and students with disabilities. The Committee urges the Department to continue to place a high priority on grant applications that aim to improve the quality of State assessments for students with disabilities and students with limited English proficiency, and to ensure the most accurate means of measuring their performance on these assessments.

#### *Javits Gifted and Talented Education*

The Committee recommends \$7,596,000, the same as the fiscal year 2007 appropriation, for the Javits Gifted and Talented Students Education Program. The budget requests no funding for this program. Funds are used for awards to State and local educational agencies, institutions of higher education, and other public and private agencies for research, demonstration, and training activities designed to enhance the capability of elementary and secondary schools to meet the special educational needs of gifted and talented students.

#### *Foreign Language Assistance*

The Committee recommends \$26,780,000 for the foreign language assistance program. The comparable funding level for fiscal year 2007 was \$23,780,000. The budget request is \$23,755,000.

The Committee intends for funding available under this program to promote the goal of well-articulated, long-sequence language programs that lead to demonstrable results for all students. The Committee directs the Department not to make grants to schools that are replacing current traditional language programs with critical needs language instruction.

Funds from this program support competitive grants to increase the quality and quantity of foreign language instruction. At least 75 percent of the appropriation must be used to expand foreign language education in the elementary grades. The Committee has included bill language that prohibits foreign language assistance program funds from being used for the foreign language incentive program.

The Committee is concerned that this program, which is the only Federal program designed to help schools meet the need for foreign language instruction, is unavailable to the poorest schools because grant recipients must provide a 50 percent match from non-Federal sources. The Committee, therefore, strongly urges the Secretary to use her ability to waive the matching requirement for qualifying schools and to increase awareness of this accommodation among the affected school population.

#### *Education for Homeless Children and Youth*

For carrying out education activities authorized by title VII, subtitle B of the Stewart B. McKinney Homeless Assistance Act, the

Committee recommends \$66,878,000. The fiscal year 2007 appropriation was \$61,871,000, and the budget request is \$61,878,000.

This program provides assistance to each State to support an office of the coordinator of education for homeless children and youth, to develop and implement State plans for educating homeless children, and to make subgrants to LEAs to support the education of those children. Grants are made to States based on the total that each State receives in title I grants to LEAs.

Under the McKinney-Vento Homeless Children and Youths Program, State educational agencies must ensure that homeless children and youth have equal access to the same free public education, including a public preschool education, as is provided to other children and youth.

#### *Training and Advisory Services*

For training and advisory services authorized by title IV of the Civil Rights Act, the Committee recommends \$7,113,000, the same as the fiscal year 2007 appropriation and the budget request.

The funds provided will support awards to operate the 10 regional equity assistance centers [EACs]. Each EAC provides services to school districts upon request. Activities include disseminating information on successful practices and legal requirements related to nondiscrimination on the basis of race, color, sex, or national origin in education programs.

#### *Education for Native Hawaiians*

For programs for the education of Native Hawaiians, the Committee recommends \$34,500,000 (Funding for this program was requested by Senators Inouye and Akaka). The comparable fiscal year 2007 funding level was \$33,907,000. The budget request does not include any funding for this purpose.

The Committee bill includes language allowing \$1,250,000 of the funds recommended to be used for construction and renovation of Native Hawaiian educational facilities.

The Committee bill includes also language stipulating that \$1,250,000 shall be used for a grant to the Center of Excellence at the University of Hawaii School of Law, for the Native Hawaiian Law School Center of Excellence. This repository houses a compilation of historical and cultural documents that facilitates preservation and examination of laws of great significance to Native Hawaiians.

The Committee also recommends support of projects that promote the development of academic curricula or instructional materials that are based on archives of oral histories of Native Hawaiian history and culture. Activities supported with project funds may include the development of archives for collectable media significant to the State of Hawaii in memory of former Senate Sergeant at Arms Henry Kuualoha Giugni. The Henry Kuualoha Giugni Kupuna Archives will facilitate the acquisition of historical records and stories unique to the culture of Native Hawaiians. The establishment of this archival collection is critical for recording, cataloguing, and digitalization of oral histories, both new and old, and securing their availability for development of innovative educational programs to assist Native Hawaiian students.

*Alaska Native Educational Equity*

The Committee recommends \$34,500,000 for the Alaska Native educational equity assistance program (Funding for this program was requested by Senator Stevens). The comparable fiscal year 2007 funding level was \$33,907,000. The budget request did not include any funds for this purpose.

These funds address the severe educational handicaps of Alaska Native schoolchildren. Funds are used for the development of supplemental educational programs to benefit Alaska Natives. The Committee bill includes language which allows funding provided by this program to be used for construction. The Committee expects the Department to use some of these funds to address the construction needs of rural schools.

*Rural Education*

The Committee recommends \$168,918,000, the same as the fiscal year 2007 appropriation, for rural education programs. The budget request is \$168,851,000.

The Committee expects that rural education funding will be equally divided between the Small, Rural Schools Achievement Program, which provides funds to LEAs that serve a small number of students, and the Rural and Low-Income Schools Program, which provides funds to LEAs that serve concentrations of poor students, regardless of the number of students served.

*Comprehensive Centers*

The Committee recommends \$60,000,000 for the comprehensive centers program. The fiscal year 2007 appropriation was \$56,257,000, and the budget request is \$56,256,000.

These funds provide continued support to a network of 21 comprehensive centers, at least one of which will operate in each of the 10 geographic regions of the United States served by the regional educational laboratories. The centers are operated by research organizations, agencies, institutions of higher education or partnerships thereof, and provide training and technical assistance on various issues to States, LEAs, and schools as identified through needs assessments undertaken in each region.

The system includes 16 regional centers that are charged with providing intensive technical assistance to State educational agencies and schools with meeting the goals of No Child Left Behind. This assistance is based in large part on the work of the five content centers, which are organized by topic area so these centers can develop the information, materials and resources that the regional centers need to fulfill their mission.

The Committee recommends increased funding for the centers as part of its initiative to improve the implementation of the No Child Left Behind Act..

INDIAN EDUCATION

Appropriations, 2007 .....	\$118,690,000
Budget estimate, 2008 .....	118,683,000
Committee recommendation .....	118,690,000

The Committee recommends \$118,690,000, the same as the fiscal year 2007 appropriation, for Indian Education programs. The budget request is \$118,683,000.

*Grants to Local Education Agencies*

For grants to local educational agencies, the Committee recommends \$95,331,000, the same as the fiscal year 2007 funding level and the budget request.

These funds provide financial support to elementary and secondary school programs that serve Indian students, including preschool children. Funds are awarded on a formula basis to local educational agencies, schools supported and operated by the Bureau of Indian Affairs, and in some cases directly to Indian Tribes.

*Special Programs for Indian Children*

The Committee recommends \$19,399,000, the same as the fiscal year 2007 funding level and the budget request, for special programs for Indian children.

Funds are used for demonstration grants to improve Indian student achievement through early childhood education and college preparation programs, and for professional development grants for training Indians who are preparing to begin careers in teaching and school administration.

*National Activities*

The Committee recommends \$3,960,000, the same as the fiscal year 2007 appropriation, for national activities. The budget request is \$3,953,000. Funds will be used to expand efforts to improve research, evaluation, and data collection on the status and effectiveness of Indian education programs.

INNOVATION AND IMPROVEMENT

Appropriations, 2007 .....	\$837,686,000
Budget estimate, 2008 .....	922,018,000
Committee recommendation .....	962,889,000

The Committee recommends an appropriation of \$962,889,000 for programs within the innovation and improvement account. The comparable fiscal year 2007 funding level for these programs was \$837,686,000 and the budget request is \$922,018,000.

*Troops-to-Teachers*

The Committee recommends an appropriation of \$14,645,000, the same as the fiscal year 2007 appropriation and the budget request, to support the Defense Department's Troops-to-Teachers program.

This program helps recruit and prepare retiring and former military personnel to become highly qualified teachers serving in high-poverty school districts. The Secretary of Education transfers program funds to the Department of Defense for the Defense Activity for Non-Traditional Education Support to provide assistance, including stipends of up to \$5,000 and/or bonuses of up to \$10,000 to eligible members of the Armed Forces so that they can obtain teacher certification or licensing. In addition, the program helps these individuals find employment in a school.

*Transition to Teaching*

The Committee recommends \$44,484,000, the same as the fiscal year 2007 appropriation, for the transition to teaching program. The budget request is \$44,482,000.

This program provides grants to help support efforts to recruit, train, and place nontraditional teaching candidates into teaching positions and to support them during their first years in the classroom. In particular, this program is intended to attract mid-career professionals and recent college graduates. Program participants are placed in high-need schools in high-need LEAs.

*National Writing Project*

The Committee recommends \$24,000,000 for the National Writing Project (Funding for this program was requested by Senators Cochran, Durbin, Feinstein, Landrieu, Leahy, Mikulski, Reed, Akaka, Baucus, Bayh, Biden, Bingaman, Boxer, Brown, Bunning, Cardin, Casey, Clinton, Coleman, Collins, Conrad, Crapo, Dodd, Grassley, Kennedy, Kerry, Klobuchar, Levin, Lieberman, Lincoln, Lott, Lugar, Menendez, Obama, Pryor, Reid, Salazar, Sanders, Schumer, Smith, Snowe, Stabenow, Tester, Whitehouse and Wyden). The comparable funding level for fiscal year 2007 was \$21,532,000. The budget request proposes to eliminate Federal funding for this program.

These funds are awarded to the National Writing Project, a non-profit organization that supports and promotes K-16 teacher training programs in the effective teaching of writing.

*Teaching of Traditional American History*

The Committee recommends \$120,000,000 for the teaching of traditional American history program. The comparable fiscal year 2007 funding level was \$119,790,000, and the budget request was \$50,000,000. This program supports competitive grants to LEAs, and funds may be used only to undertake activities that are related to American history, and cannot be used for social studies coursework. Grant awards are designed to augment the quality of American history instruction and to provide professional development activities and teacher education in the area of American history. The Committee directs the Department to continue its current policy of awarding 3-year grants.

The Committee bill retains language that allows the Department to reserve up to 3 percent of funds appropriated for this program for national activities.

*School Leadership*

The Committee recommends \$14,731,000, the same as the fiscal year 2007 appropriation, for the school leadership program. The budget request proposes to eliminate funding for this program. The program provides competitive grants to assist high-need LEAs to recruit and train principals and assistant principals through activities such as professional development and training programs. The Committee continues to recognize the critical role that principals and assistant principals play in creating an environment that fosters effective teaching and high academic achievement for students.

*Advanced Credentialing*

The Committee recommends \$9,821,000 for the advanced credentialing program (Funding for this program was requested by Senators Cochran and Harkin). The comparable fiscal year 2007 funding level was \$16,695,000. The budget request proposes to eliminate funds for this program.

The Committee includes bill language directing all of the funding for this program to the National Board for Professional Teaching Standards [NBPTS]. Funds available assist the board's work in providing financial support to States for teachers applying for certification, increasing the number of minority teachers seeking certification and developing outreach programs about the advanced certification program.

No funding is included for the American Board for the Certification of Teacher Excellence [ABCTE]; the 5-year grant for the ABCTE ended in fiscal year 2007. The Committee recommendation is sufficient to continue funding for the NBPTS at the level it received in fiscal year 2007.

*Charter Schools Grants*

The Committee recommends \$214,783,000, the same as the fiscal year 2007 appropriation, for the support of charter schools. The budget request is \$214,782,000.

This appropriation supports the planning, development, and initial implementation of charter schools, which are public schools that receive exemption from many statutory and regulatory requirements in exchange for promising to meet agreed-upon accountability measures. State educational agencies that have the authority under State law to approve charter schools are eligible to compete for grants. If an eligible SEA does not participate, charter schools from the State may apply directly to the Secretary. The authorizing statute requires that amounts appropriated in excess of \$200,000,000 and less than \$300,000,000 shall be used for 5-year competitive grants to States that operate per-pupil facilities aid programs for charters schools. Federal funds are used to match State-funded programs in order to provide charter schools with additional resources for charter school facilities financing. At the Committee recommendation, \$14,783,000 will be available to continue support for per-pupil facilities aid grants.

*Credit Enhancement for Charter School Facilities*

The Committee does not recommend any funding for this program. The comparable funding level for fiscal year 2007 was \$36,611,000, the same as the budget request. The Committee notes that the authorization for this program expired in fiscal year 2005.

This program provides assistance to help charter schools meet their facility needs. Funds are provided on a competitive basis to public and nonprofit entities, to leverage non-Federal funds that help charter schools obtain school facilities through purchase, lease, renovation and construction.

*Voluntary Public School Choice*

The Committee recommends \$26,278,000, the same as the fiscal year 2007 appropriation, for the voluntary public school choice program. The budget request is \$26,275,000.

This program supports efforts by States and school districts to establish or expand State- or district-wide public school choice programs, especially for parents whose children attend low-performing public schools.

*Magnet Schools Assistance*

The Committee recommends \$106,693,000, the same as the fiscal year 2007 appropriation, for the magnet schools assistance program. The budget request is \$106,685,000.

This program supports grants to local educational agencies to establish and operate magnet schools that are part of a court-ordered or federally approved voluntary desegregation plan. Magnet schools are designed to attract substantial numbers of students from different social, economic, ethnic, and racial backgrounds. Grantees may use funds for planning and promotional materials, teacher salaries, and the purchase of computers and other educational materials and equipment.

*Fund for the Improvement of Education*

The Committee recommends an appropriation of \$218,699,000 for the Fund for the Improvement of Education [FIE]. The fiscal year 2007 appropriation was \$158,510,000, and the budget request was \$58,108,000.

For programs of national significance authorized under section 5411 of the Elementary and Secondary Education Act [ESEA], the Committee recommendation includes \$700,000, the same as the budget request, for the National Institute of Building Sciences to continue operation of the National Clearinghouse for Educational Facilities, the Nation's sole source for comprehensive information about school planning, design, financing, construction, and maintenance. The Committee recommends an additional \$300,000 for this purpose within Safe and Drug-Free Schools and Communities National Programs to address issues related to school safety and healthy school buildings.

The Committee recommendation includes \$12,000,000 for Teach for America. It also includes resources for the following activities: Reach Out and Read; evaluation and data quality initiatives; peer review; and other grant activities authorized under section 5411 of the ESEA.

The budget request also proposed funding the Language Teacher Corps and the Teacher to Teacher initiative. The Committee recommendation does not include funding for these activities.

Within the total amount for FIE, the Committee recommendation also includes funding for separately authorized programs as described in the paragraphs below.

The Committee recommends \$26,043,000, an increase of \$1,000,000 over the budget request and the fiscal year 2007 appropriation, to award a contract to Reading Is Fundamental Inc. [RIF] to provide reading-motivation activities. RIF, a private nonprofit

organization, helps prepare young children and motivate older children to read, through activities including the distribution of books.

The administration recommended eliminating funding for activities listed below.

The Committee recommends no funding for the Star Schools program. The fiscal year 2007 appropriation was \$11,513,000. The Star Schools program is designed to improve instruction in math, science, foreign languages, and other areas such as vocational education, to underserved populations by means of telecommunications technologies.

The Committee recommends \$10,890,000, the same as the fiscal year 2007 appropriation, for the Ready to Teach program. Ready to Teach encompasses funding for PBS TeacherLine and one or more nonprofit entities, for the purpose of continuing to develop telecommunications-based programs to improve teacher quality in core areas. It also includes digital educational programming grants, which encourage community partnerships among local public television stations, State and local educational agencies, and other institutions to develop and distribute digital instructional content based on State and local standards.

The Committee recommends \$9,000,000 for the Education through Cultural and Historical Organizations [ECHO] Act of 2001 (Funding for this program was requested by Senators Cochran, Inouye, Stevens, and Kennedy). The fiscal year 2007 appropriation was \$8,910,000. Programs authorized under ECHO provide a broad range of educational, cultural, and job training opportunities for students from communities across the Nation, including Alaska, Hawaii, Massachusetts and Mississippi.

The Committee has included \$36,277,000 for arts in education (Funding for this program was requested by Senators Cochran, Bingaman, and Kennedy). The comparable funding level for fiscal year 2007 was \$35,277,000. Within the total, \$6,305,310 is for the John F. Kennedy Center for the Performing Arts; \$8,365,600 is for VSA arts; \$13,258,080 is for the competitive art education model grant program for the development of model projects that effectively strengthen and integrate arts and cultural partnerships into the core curriculum; \$7,856,640 is for grants for professional development for music, dance, drama, and visual arts educators to be administered by the U.S. Department of Education; \$491,040 is to continue the evaluation and national dissemination of information regarding model programs and professional development projects funded through the Arts in Education section, including dissemination promising practices from funded projects and technical assistance for self-evaluation; and \$500,000 shall be used to support the National Center for Education Statistics Fast Response Survey System to collect data for the report of Arts Education in Public Elementary and Secondary Schools during the 2008–2009 school year. The Committee expects this survey and reporting to have the comprehensive quality of the 2002 report and to include national samples of elementary and secondary school principals, as well as surveys of elementary and secondary classroom teachers and arts specialists.

The Committee recommends \$39,600,000, the same as the fiscal year 2007 appropriation, for parental information and resource cen-

ters, which provide training, information, and support to parents, State and local education agencies, and other organizations that carry out parent education and family involvement programs.

The Committee notes that the No Child Left Behind Act requires grantees to use at least 30 percent of their awards to establish, expand, or operate Parents as Teachers, Home Instruction Program for Preschool Youngsters, or other early childhood parent education programs.

The Committee recommends \$5,000,000 to continue support for the mental health integration in schools program. The comparable funding level for fiscal year 2007 was \$4,910,000. This program supports grants to or contracts with State educational agencies, local educational agencies or Indian tribes to increase student access to mental health care by linking schools with their local mental health systems. The Committee expects this program to continue to be carried out by the Office of Safe and Drug-Free Schools.

The Committee includes \$1,879,000, the same as the fiscal year 2007 appropriation, for the women's educational equity program. This program supports projects that assist in the local implementation of gender equity policies and practices.

The Committee recommendation includes \$1,473,000, the same as the fiscal year 2007 appropriation, for activities authorized by the Excellence in Economics Education Act. These funds will support a grant to a nonprofit educational organization to promote economic and financial literacy among kindergarten through 12th grade students.

The Committee recommendation includes \$1,980,000, the same as the fiscal year 2007 appropriation, to carry out the American History and Civics Education Act of 2004. From the amount available, the Department will make grants to support Presidential Academies for Teaching of American History and Civics and Congressional Academies for Students of American History and Civics.

The Committee recommendation also includes bill language requiring that funds be provided to the following organizations in the amounts specified:

Project	Committee recommendation	Requested by
Action for Bridgeport Community Development, Bridgeport, CT, to expand and evaluate the Total Learning model in Bridgeport schools.	\$500,000	Lieberman, Dodd
Alaska Department of Education and Early Development, Juneau, AK, for Big Brothers/Big Sisters statewide, in partnership with Alaska Dept. of Education, Boys and Girls Club, and Cook Inlet Tribal Council for a comprehensive mentoring program in Alaska.	300,000	Stevens, Murkowski
Alaska Dept. of Education and Early Development, Juneau, AK, for the Alaska statewide mentor project.	1,250,000	Stevens
Alaska Sealife Center, Seward, AK, for a marine ecosystems education program.	250,000	Stevens
Allied Services Foundation, Clarks Summit, PA, for dyslexia education programs at the Allied Services dePaul School.	75,000	Specter, Casey
American Foundation for Negro Affairs National Education and Research Fund, Philadelphia, PA, to raise the achievement level of minority students and increase minority access to higher education.	100,000	Specter
Anchorage's Promise, Anchorage, AK, to implement America's Promise child mentoring and support program in Anchorage.	100,000	Stevens
ASPIRA Inc. of New Jersey, Newark, NJ, to provide academic assistance and leadership development.	100,000	Lautenberg, Menendez

Project	Committee recommendation	Requested by
AVANCE, Inc., San Antonio, Texas, for training and curriculum development for a parent-child educational program.	250,000	Cornyn
Barnstable, MA, for the development of programs and procurement of educational equipment at a youth and community center.	250,000	Kennedy, Kerry
Beaver County, Beaver County, PA, to implement educational programming for K-12 students, including safe and appropriate use of the Internet.	75,000	Specter
Berkeley Unified School District, Berkeley, CA, for a nutrition education program.	100,000	Boxer
Berks County Intermediate Unit, Reading, PA, for music education programs ....	100,000	Specter
Best Buddies International, Inc., Miami, FL, to enhance the lives of people with mental retardation by providing opportunities for one-to-one friendships and integrated employment.	250,000	Harkin
Best Buddies, Miami, FL, to develop a Nevada site for Best Buddies .....	200,000	Reid
Big Brothers and Big Sisters of Southeastern Pennsylvania, Philadelphia, PA, for recruitment, placement, and oversight of school-based mentoring programs.	600,000	Specter
Boys & Girls Club of Greater Milwaukee, Milwaukee, WI, to expand an early literacy program for children in Milwaukee.	300,000	Kohl
Brigham City, Brigham City, Utah, for acquisition of equipment for a distance learning program.	50,000	Hatch
Brooklyn Public Library, Brooklyn, NY, for the Learning Centers .....	500,000	Clinton, Schumer
Carnegie Hall, NY, NY, for the National Music Education Programs .....	250,000	Clinton, Schumer
Cedar Rapids Symphony Orchestra, Cedar Rapids, IA, to support the Residency program.	400,000	Harkin
Center for Advancing Partnerships in Education, Allentown, PA, to develop a foreign language distance learning program and for teacher training.	75,000	Specter
Charter School Development Fund, Las Vegas, NV, to integrate technology into the curriculum at a charter school in Las Vegas.	500,000	Reid
Chesapeake Bay Foundation, Annapolis, MD, to provide teacher training, student education and field experiences in the Chesapeake Bay.	500,000	Cardin, Casey, Warner, Webb
Chester County Intermediate Unit, Dowingtown, PA, for a vocational technical education program.	75,000	Specter
Child and Family Network Centers, Virginia, Alexandria, VA, for education services for at-risk youth.	150,000	Warner, Webb
Children Uniting Nations, Los Angeles, CA, for foster child mentoring program in Los Angeles.	200,000	Feinstein
ChildSight New Mexico, Gallup, NM, for a vision screening and eye glass program for children.	50,000	Domenici
City Year New Hampshire, Stratham, NH, for expansion of an afterschool program for the Young Heroes Program.	150,000	Gregg
Clark County School District, Las Vegas, NV, to create an Education Executive Leadership program.	250,000	Reid
Clark County School District, Las Vegas, NV, to expand the Newcomer Academy within Del Sol High School.	250,000	Reid
Clay County School system, WV, for the continuation and expansion of Skills West Virginia programs in counties around West Virginia.	200,000	Byrd
Communities in Schools of Georgia, Atlanta, GA, for mentoring programs .....	100,000	Chambliss
Community Empowerment Association, Inc., Pittsburgh, PA, for a truancy reduction initiative.	75,000	Specter
Congreso de Latinos Unidos, Inc., Philadelphia, PA, for a career education and preparation initiative for at-risk youth.	100,000	Specter, Casey
Council Bluffs Early Learning Resource Center, Council Bluffs, IA, for the FAMILY program.	500,000	Harkin
Creative Visions in Des Moines, IA, for outreach to at-risk youth .....	150,000	Harkin
Cristo Rey High School, Chicago, IL, to improve technologies for the school's library and technology center.	400,000	Durbin
Cumberland, RI, for afterschool programs and activities .....	500,000	Reed
Delaware Department of Education, Dover, DE, for the Vision Network of Schools and Districts.	250,000	Carper, Biden
Delta Arts Alliance, Cleveland, MS, for in-school and after school arts education programs.	100,000	Cochran
Des Moines Community School District and Urban Dreams, Des Moines, IA, to continue a demonstration on full service community schools.	350,000	Harkin
Des Moines Community School District, IA, to expand pre-kindergarten programs.	750,000	Harkin

Project	Committee recommendation	Requested by
Detroit Area Pre-College Engineering Program, Detroit, MI, for student tracking and curriculum development.	200,000	Levin, Stabenow
Early Childhood and Family Learning Center Foundation, New Orleans, LA, to establish a comprehensive early childhood center.	500,000	Landrieu
East Palo Alto, East Palo Alto, CA, to provide afterschool learning and enrichment activities for the students of East Palo Alto.	100,000	Boxer
East Saint Louis High School, East Saint Louis, IL, to upgrade the school's technology and sciences programs.	600,000	Durbin
ECHO Center, Burlington, VT, to enhance educational opportunities for students regarding the Lake Champlain Quadracentennial.	100,000	Leahy
Educating Young Minds, Los Angeles, CA, for educational programs .....	100,000	Feinstein
Eisenhower Foundation, Washington, DC, to replicate the Delaney Street project in Iowa.	700,000	Harkin
Esmeralda County School District, Goldfield, NV, to continue accelerated reading and math programs for K-8 students in Esmeralda County.	100,000	Reid
Everybody Wins, Washington, DC, for childhood literacy programs .....	500,000	Harkin
Fairbanks North Star Borough School District, Fairbanks, AK, to expand the PLATO learning program to Fairbanks North Star Borough.	250,000	Stevens
Fairfield, Fairfield, CA, to support daily operation of The Place to Be After Three afterschool program at local school sites.	100,000	Boxer
FirstBook, Washington, DC, for the expansion of programs in West Virginia .....	250,000	Byrd
FirstBook, Washington, DC, for the Maine literacy initiative for Low Income Children.	100,000	Collins, Snowe
Florence Prever Rosten Foundation, Darby, MT, to develop MAPS: Media Arts in the Public Schools program.	100,000	Baucus
Galena City School District, Galena, AK, for a boarding school for low performing Native students from remote villages across Western Alaska.	500,000	Stevens
George S. Eccles Ice Center, North Logan, Utah, to expand the science, physical education, and creative movement program.	50,000	Hatch
Hackett-Bower Clinic at Magnolia Speech School, Westport, CT, for acquisition of equipment and programs.	300,000	Cochran
Harford County Board of Education, Bel Air, MD, to support a science and math program at Aberdeen High School.	400,000	Mikulski
Harrisburg (PA) Area School District, Harrisburg, PA, to support the district's pre-kindergarten program.	500,000	Casey
Hays Community Economic Development Corporation, Hays, MT, to develop a Native American culturally competent curriculum.	200,000	Baucus, Tester
Homer-Center School District, Homer City, PA, for science curriculum development and acquisition of technology.	100,000	Specter
Houston Independent School District, Houston, Texas, to create an incentive-performance plan for teachers at the campus and individual-teacher levels.	500,000	Cornyn
Houston Zoo, Houston, TX, for educational programming .....	100,000	Hutchison
Indianapolis, IN, for the Indianapolis Center for Education Innovation .....	400,000	Bayh, Lugar
Institute for Student Achievement (ISA), Lake Success, NY, for the ISA High School Improvement Program.	250,000	Schumer, Clinton
Internet Keep Safe Coalition, Salt Lake City, Utah, to provide educational materials to k-12 students regarding Internet safety.	450,000	Bennett
Iowa Association of School Boards, Des Moines, IA, for the Lighthouse for School Reform project.	500,000	Harkin
Iowa City Community School District, IA, to implement a literacy program .....	500,000	Harkin
Iowa Department of Education to continue the Harkin grant program .....	7,500,000	Harkin
Iowa School Boards Foundation, Des Moines, IA, for continuation and expansion of the Skills Iowa program.	3,000,000	Harkin
Iowa State Education Association, Des Moines, IA, for an initiative to educate students on the role of international trade in the U.S. economy.	75,000	Grassley
Jazz at Lincoln Center, NY, NY, for education programs .....	250,000	Clinton, Schumer
Jeremiah Cromwell Disabilities Center, Portland, ME, for awareness training for students.	100,000	Collins, Snowe
Johns Hopkins University's Center for Talented Youth, Baltimore, MD, to conduct a longitudinal study on outcomes of Center for Talented Youth summer programs.	250,000	Mikulski
Jumpstart for Young Children, Boston, MA, to recruit and train college students to serve as mentors for at-risk preschool children.	150,000	Reed
Jumpstart for Young Children, Seattle, WA, to expand Jumpstart's One Child at a Time mentoring project in Washington.	350,000	Murray

Project	Committee recommendation	Requested by
Kanawha County School System, WV, for the continuation of Following the Leaders programs.	810,000	Byrd
Kansas Learning Center for Health, Halstead, KS, to support health education, including curriculum development.	100,000	Roberts
Kauai Economic Development Board, HI, for math and science education .....	300,000	Inouye, Akaka
KIPP Foundation, San Francisco, CA, for subgrants to support student programs and extended learning time at KIPP Gaston College Preparatory and KIPP Pride High School in Gaston, NC.	100,000	Burr, Dole
KIPP Foundation, San Francisco, CA, to support student programs and extended learning time through a subgrant to KIPP Ujima Village Academy in Baltimore.	300,000	Cardin
KIPP Foundation, San Francisco, CA, for subgrants to support student programs and extended learning time in Nashville and Memphis, Tennessee.	250,000	Alexander
Klingberg Family Centers, Inc., New Britain, CT, for the acquisition and implementation of new computer technology associated with the Klingberg Family Centers' Special Education Enhancement Initiative.	400,000	Dodd, Lieberman
La Causa Charter School, Milwaukee, WI, to implement a science and robotics lab.	100,000	Kohl
Lafayette Parish School Board, Lafayette, LA, for acquisition of equipment technology upgrades.	67,000	Vitter
Lander County School District, Battle Mountain, NV, to continue a math and science remediation program for high school students.	250,000	Reid
Loess Hills Area Education Agency in Iowa for a demonstration in early childhood education.	750,000	Harkin
Loras College, Dubuque, IA, for a literacy program with the Dubuque elementary schools.	500,000	Harkin, Grassley
Los Angeles, CA, for the LA's BEST afterschool enrichment program .....	250,000	Feinstein
Louisiana Family Forum, Baton Rouge, LA, to develop a plan to promote better science education.	100,000	Vitter
Louisiana State University in Shreveport, Shreveport, LA, to provide professional development for teachers and faculty in Title I schools with low performance scores.	300,000	Landrieu, Vitter
Lower Pioneer Valley Educational Collaborative, West Springfield, MA, for the procurement of educational equipment and development of academic programs.	200,000	Kennedy, Kerry
Lyndon Baines Johnson Foundation, Austin, Texas, for the Presidential timeline project.	900,000	Harkin
Lynwood, CA, to expand the afterschool Homework Assistance Program at the Lynwood Public Library.	100,000	Boxer
Maine Alliance for Arts Education, Augusta, ME, for the Complete Education for Rural Students project.	100,000	Collins, Snowe
Marketplace of Ideas/Marketplace for Kids, Inc., Mandan, ND, for a statewide program focused on entrepreneurship education.	500,000	Dorgan, Conrad
Massachusetts 2020 Foundation, Boston, MA, for continued development of an expanded instruction demonstration program.	220,000	Kennedy, Kerry
Maui Economic Development Board, HI, for the girls into science program .....	300,000	Inouye
McKelvey Foundation, New Wilmington, PA, to an entrepreneurial college scholarships for rural, low-income Pennsylvania high school graduates.	100,000	Specter, Casey
Mentoring Partnership of Southwestern Pennsylvania, Pittsburgh, PA, for recruitment, placement, and oversight of school-based mentoring programs.	500,000	Specter
Mercy Vocational High School, Philadelphia, PA, for vocational educational programs.	100,000	Specter
Metropolitan Wilmington Urban League, Wilmington, DE, to continue a program aimed at closing the achievement gap among low-income and minority students.	500,000	Biden, Carper
Military Heritage Center Foundation, Carlisle, PA, for the U.S. Army Heritage and Education Center for history education programs.	75,000	Specter
Milwaukee Public Schools, Milwaukee, WI, to support afterschool activities for at-risk youth.	1,300,000	Kohl
Mississippi State University, Mississippi State, MS, for enhancing K-12 Science and Mathematics Preparation.	500,000	Cochran
Mississippi University for Women, Columbus, MS, for environmental education programs for the Science on the Tennessee-Tombigbee Waterway program.	200,000	Cochran

Project	Committee recommendation	Requested by
National American Indian, Alaskan and Hawaiian Educational Development Center, Sheridan, WY, to train teachers serving Native American students in an early literacy learning and math framework.	1,000,000	Enzi
New Mexico Military Institute, Roswell, NM, for a character development leadership camp at the New Mexico Military Institute.	50,000	Domenici
New Mexico State University, Las Cruces, NM, for the Southern New Mexico Science, Engineering, Mathematics and Aerospace Academy.	200,000	Domenici
New Mexico State University, Las Cruces, NM, to continue a program to transition high school students into technical careers.	400,000	Bingaman, Domenici
New School University, New York, NY, for the Institute for Urban Education .....	950,000	Clinton, Schumer
New York Hall of Science, Queens, NY, for science exhibits and educational programming.	600,000	Clinton, Schumer
North Country Education Services Agency, Gorham, NH, for the North Country Gear Up College Prep Initiative, including online curriculum development.	200,000	Gregg
North Slope Borough, Anchorage, AK, for an early education program .....	300,000	Stevens
Northwest Center, Seattle, WA, to provide and expand academic and vocational resources to developmentally delayed or disabled persons in King County.	250,000	Murray, Cantwell
Oakland School of the Arts, Oakland, CA, for educational equipment .....	500,000	Feinstein
Oelwein Community School District, Oelwein, IA, for technology and program needs for a math and science academy.	125,000	Grassley
Ogden City Schools, Ogden, Utah, to enhance the aerospace, math, and science curriculum.	50,000	Hatch
Omaha, Nebraska, for expansion of the Omaha's after school initiative .....	100,000	Hagel
Ouachita Parish School Board, Monroe, LA, for acquisition of equipment technology upgrades.	66,000	Vitter
Pacific Islands Center for Educational Development in American Samoa, for a mentoring program aimed at college prep.	650,000	Inouye
Parents as Teachers National Center, St. Louis, MO, for expanded outreach to support school readiness in the Gateway Parents as Teachers program in the City of St. Louis.	225,000	Bond
PE4life Foundation, Kansas City, MO, for expansion and assessment of PE4life programs across Iowa.	500,000	Harkin
Philadelphia Martin Luther King, Jr. Association for Nonviolence Inc., Philadelphia, PA, for its College for Teens program.	100,000	Specter
Polynesian Voyaging Society, Honolulu, HI, for cultural education programs .....	250,000	Inouye
Project HOME, Philadelphia, PA, for an after school program .....	100,000	Specter
Provo City, Provo, Utah, to expand education programs at the Arts Center .....	50,000	Hatch
Rapides Parish School Board, Alexandria, LA, for acquisition of equipment technology upgrades.	66,000	Vitter
Robert H. Clappitt Foundation, Inc., New York, NY, to train elementary and secondary students in journalism.	150,000	Landrieu
Saint Joseph's University, Philadelphia, PA, to develop a Public Education Partnership to provide professional development to area principals and teachers.	100,000	Specter
Saint Louis SCORES, St. Louis, MO, to expand after school programs .....	100,000	Bond
San Bernadino Boys and Girls Club, San Bernardino, CA, to expand programs that are available in education, health and the arts.	250,000	Boxer
San José, CA, for the Early Start/Great Start School Readiness Initiative .....	200,000	Feinstein
San Juan School District, Blanding, Utah, to provide intervention advocacy and case management for at-risk students.	50,000	Hatch
Save the Children, Westport, CT, for Mississippi Gulf Coast early childhood in-school and after school programs.	200,000	Cochran
Save the Children, Westport, CT, to implement supplemental literacy programs for children in grades K-8 in rural Nevada schools.	200,000	Reid
School at Jacob's Pillow, Beckett, MA, for the development of youth cultural and educational programs.	180,000	Kennedy, Kerry
Sevier School District, Richfield, Utah, for teacher training and professional development to increase student achievement in mathematics.	50,000	Hatch
Shiloh Economic and Entrepreneurial Lifelong Development Corporation, Plainfield, NJ, for academic enrichment programs.	200,000	Menendez, Lautenberg
Skills Alaska, Anchorage, AK, for statewide teacher training and mentoring program, Anchorage.	1,000,000	Stevens
South Dakota Symphony, Sioux Falls, SD, for educational outreach to Native Americans.	100,000	Johnson
SouthCoastConnected, New Bedford, MA, for implementation of the Drop the Drop-Out Rate Initiative.	180,000	Kennedy, Kerry

Project	Committee recommendation	Requested by
Southeast Island School District, Thorne Bay, AK, to develop interactive video conferencing to provide special education services to 9 isolated school sites in Southeast Alaska.	100,000	Stevens
SouthEastern Pennsylvania Consortium for Higher Education, Glenside, PA, for the Institute of Mathematics and Science to provide professional development to K-12 teachers.	150,000	Specter, Casey
Springfield, Missouri, for program development and expansion, equipment and technology for the Ready to Learn Program.	600,000	Bond
Technical Research and Development Authority, Titusville, FL, to provide professional workshops for teachers in STEM-related fields.	250,000	Bill Nelson
Tulane University, New Orleans, LA, to provide teacher education and leadership preparation to support the rebuilding of New Orleans schools.	1,500,000	Landrieu
Tulsa Public Schools, Tulsa, OK, for academic programs .....	100,000	Inhofe
Union County, Elizabeth, NJ, for training programs at the Union County Academy for Allied Health Sciences.	300,000	Lautenberg, Menendez
United Inner City Services, Kansas City, MO, to enhance and expand early learning programs.	750,000	Bond
United Way of Southeastern Pennsylvania, Philadelphia, PA, for recruitment, placement, and oversight of school-based mentoring programs.	400,000	Specter
University of Alaska/Southeast, Juneau, AK, for the Alaska Distance Education Technology Consortium for distance learning.	1,750,000	Stevens
University of Maine, Orono, ME, to maintain healthy interscholastic youth sports programs.	190,000	Collins, Snowe
University of North Alabama, Florence, AL, for research to develop a model center for teacher preparation.	150,000	Sessions
University of North Carolina at Greensboro, Greensboro, NC, for a teletherapy program to address the shortage of speech language pathologists.	100,000	Burr, Dole
University of Northern Iowa, Cedar Falls, IA, to continue the 2 + 2 teacher education demonstration program.	500,000	Harkin, Grassley
University of Southern Mississippi, Hattiesburg, MS, for gifted education programs at the Frances A. Karnes Center for Gifted Studies program.	400,000	Cochran
University of Southern Mississippi, Hattiesburg, MS, for literacy enhancement ..	400,000	Cochran
University of Vermont, Burlington, VT, to establish the Educational Excellence program.	3,000,000	Leahy, Byrd, Harkin, Inouye
UrbanFUTURE, St. Louis, MO, to expand literacy, mentoring, and after-school services.	300,000	Bond
Utah State Office of Education, Salt Lake City, Utah, for a mentoring program.	500,000	Bennett
Virginia Aquarium and Marine Science Center (VAMSC), Virginia Beach, VA, to expand education outreach programs.	150,000	Warner, Webb
Waldo County Preschool & Family Services, Belfast, ME, for the Maine early language and literacy initiative.	100,000	Collins, Snowe
Washoe County School District, Reno, NV, for equipment for a parental notification system.	250,000	Reid
Washoe County School District, Reno, NV, to expand the Classroom on Wheels Program for low-income students.	300,000	Reid
West River Foundation, Rapid City, SD, for K-12 administrator development ....	100,000	Johnson
West Valley City, West Valley City, Utah, to expand the after school learning program.	50,000	Hatch
Widener University, Chester, PA, for an early childhood education program .....	100,000	Specter
YMCA of Greater Saint Louis, St. Louis, MO, to expand after school programming at the Monsanto Family YMCA.	250,000	Bond
Youth Advocate Programs, Inc., Harrisburg, PA, for alternative school services.	100,000	Specter

### *Teacher Incentive Fund*

The Committee recommendation includes \$99,000,000 for the teacher incentive fund program. The fiscal year 2007 appropriation was \$200,000, and the budget request is \$199,000,000.

Under this program, the Secretary shall use not less than 95 percent of these funds to award competitive grants to local educational agencies [LEAs], including charter schools that are LEAs, States,

or partnerships of (1) a local educational agency, a State, or both and (2) at least one nonprofit organization to design and implement fair, differentiated compensation systems for public school teachers and principals based primarily on measures of gains in student achievement, in addition to other factors, for teachers and principals in high-need schools.

Not more than 5 percent of the appropriation may be used by the Secretary to provide schools with assistance in implementing this program through one or more grants to an organization or organizations with expertise in providing research-based expert advice to support schools initiating and implementing differentiated compensation systems, training school personnel, disseminating information on effective teacher compensation systems, and providing program outreach through a clearinghouse of best practices. This set-aside also will support the design and implementation of a program evaluation.

The Committee recommendation will support continuation of awards made in calendar years 2006 and 2007, using fiscal year 2006 funds.

#### *Ready to Learn Television*

The Committee recommends an appropriation of \$25,255,000 for the Ready to Learn Television program. The comparable funding level for fiscal year 2007 was \$24,255,000, the same as the budget request.

Ready to Learn Television supports the development and distribution of educational television programming designed to improve the readiness of preschool children to enter kindergarten and elementary school. The program also supports the development, production, and dissemination of educational materials designed to help parents, children, and caregivers obtain the maximum advantage from educational programming. The Committee expects the increase over fiscal year 2007 to be used for Ready to Learn outreach programs at the Corporation for Public Broadcasting.

#### *Close Up Fellowships*

The Committee recommendation includes \$2,500,000 for Close Up Fellowships (Funding for this program was requested by Senators Harkin, Craig and Lautenberg). The comparable funding level for fiscal year 2007 was \$1,454,000. The budget request did not include any funds for this purpose. Close Up Fellowships, which are administered by the Close Up Foundation of Washington, DC, provide fellowships to students from low-income families and their teachers to enable them to spend 1 week in Washington attending seminars and meeting with representatives of the three branches of the Federal Government.

#### *Advanced Placement*

The Committee recommends \$42,000,000 for Advanced Placement programs. The comparable funding level for fiscal year 2007 was \$37,026,000. The budget request includes \$122,175,000 for this purpose.

The first priority of the program is to subsidize test fees for low-income students who are enrolled in an Advanced Placement class

and plan to take an Advanced Placement test. The balance of the funds are allocated for Advanced Placement Incentive Program grants, which are used to expand access for low-income individuals to advanced placement programs. Eligible activities include teacher training and participation in online Advanced Placement courses, among other related purposes.

#### SAFE SCHOOLS AND CITIZENSHIP EDUCATION

Appropriations, 2007 .....	\$729,518,000
Budget estimate, 2008 .....	324,248,000
Committee recommendation .....	697,112,000

#### *Safe and Drug-Free Schools and Communities*

The Committee recommends a total of \$697,112,000 for activities to promote safe schools and citizenship education. The comparable fiscal year 2007 funding level was \$729,518,000 and the budget request is \$324,248,000.

*State Grant Program.*—The Committee recommends \$300,000,000 for the safe and drug-free schools and communities State grant program. The comparable fiscal year 2007 funding level was \$346,500,000. The budget request is \$100,000,000. This formula-based State grant program provides resources to Governors, State educational agencies, and local educational agencies for developing and implementing a wide range of activities that help create and maintain safe and drug-free learning environments in and around schools.

The Committee anticipates that the program will be more focused on specific activities when it is reauthorized as part of the No Child Left Behind Act.

*National Programs.*—The Committee has included \$139,112,000 for the national programs portion of the safe and drug-free schools and communities program. The comparable funding level for fiscal year 2007 was \$141,112,000, and the budget request is \$224,248,000. The Committee recommendation includes \$1,000,000, a reduction of \$2,000,000 from fiscal year 2007, for Project SERV (School Emergency Response to Violence), which provides education-related services to LEAs in which the learning environment has been disrupted due to a violent or traumatic crisis. These funds are available until expended. The Committee believes that \$1,000,000 will be sufficient for fiscal year 2008, given the carry-over of funds from previous years.

The Committee continues to be concerned about the increasing problem of alcohol and drug abuse on college campuses. The Committee has included bill language requiring the Department to spend \$850,000 on a program under the guidelines in section 120(f) of Public Law 105–244. This program identifies and provides models of alcohol and drug abuse prevention and education programs in higher education. The Committee includes these funds within the postsecondary alcohol prevention efforts proposed in the budget request.

The Committee expects that the Department will provide \$300,000 for the continued operation of the National Clearinghouse for Educational Facilities. These funds will be used to address issues related to school safety and healthy school buildings. The

Committee has included additional funds for the Clearinghouse through the Fund for the Improvement of Education, as the budget requested.

The Committee recommendation includes \$79,200,000 to continue the Safe Schools/Healthy Students initiative, as the budget requested. The Committee also includes funds for school emergency preparedness activities, drug testing, the continuation of a study on violence prevention, and other activities.

The Committee recommendation continues the practice of funding character education as a separate program, rather than including it within national activities as proposed by the budget.

The Committee is concerned about the prevalence of bullying in schools, and it urges Federal support for the implementation of effective, research-based and comprehensive bullying prevention programs. The adoption of research and prevention strategies for bullying that targets obese children and its effect on the development of low self-esteem is strongly encouraged.

#### *Alcohol Abuse Reduction*

The Committee recommends \$33,000,000 for grants to LEAs to develop and implement programs to reduce underage drinking in secondary schools. The comparable funding level for fiscal year 2007 was \$32,409,000. The budget request did not include any funds for this purpose. The Committee directs the Department and the Substance Abuse and Mental Health Services Administration [SAMHSA] to continue to work together on this effort.

#### *Mentoring*

The Committee recommends \$50,000,000 to support mentoring programs and activities for children who are at risk of failing academically, dropping out of school, getting involved in criminal or delinquent activities, or who lack strong positive role models. The fiscal year 2007 funding level was \$48,814,000. The budget request did not include any funds for this purpose.

#### *Character Education*

The Committee recommends \$25,000,000 to provide support for the design and implementation of character education programs. The comparable funding level for fiscal year 2007 was \$24,248,000. The budget request is also \$24,248,000 for this program, but it proposes to include the funding within safe and drug-free schools and communities national activities.

#### *Elementary and Secondary School Counseling*

The Committee recommends \$40,000,000 to establish or expand counseling programs in elementary schools. The comparable fiscal year 2007 funding level was \$34,650,000. The budget request does not include any funds for this program. As authorized by the No Child Left Behind Act, all amounts appropriated up to \$40,000,000 are used only for elementary school counseling programs.

#### *Carol M. White Physical Education for Progress Program*

The Committee recommends \$80,000,000 to help LEAs and community-based organizations initiate, expand and improve physical

education programs for students in grades K–12. The comparable funding level for fiscal year 2007 was \$72,674,000. The budget request does not include any funding for this program. Provision of this funding will help schools and communities nationwide improve their structured physical education programs for students and help children develop healthy lifestyles to combat the epidemic of obesity in the Nation.

*Civic Education*

The Committee recommends \$30,000,000 to improve the quality of civics and Government education, to foster civic competence and responsibility, and to improve the quality of civic and economic education through exchange programs with emerging democracies (Funding for this program was requested by Senators Cochran, Landrieu, Leahy, Reed, Akaka, Baucus, Bayh, Biden, Bingaman, Boxer, Brown, Bunning, Cantwell, Cardin, Clinton, Coleman, Collins, Conrad, Dodd, Dole, Durbin, Ensign, Feinstein, Hagel, Kennedy, Kerry, Levin, Lieberman, Lincoln, Lott, Lugar, Martinez, Menendez, Murkowski, Bill Nelson, Obama, Pryor, Salazar, Sanders, Schumer, Sessions, Smith, Snowe, Stabenow, Tester, Whitehouse, and Wyden). The comparable fiscal year 2007 appropriation was \$29,111,000 for civic education, and the budget request proposed to eliminate funding for this purpose.

The Committee recommends \$15,000,000 for the We the People programs, which are directed by statute to the Center for Civic Education, \$12,000,000 for the Cooperative Education Exchange, which are directed by statute to the Center for Civic Education and the National Council on Economic Education, and \$3,000,000 for a competitive grant program to improve public knowledge, understanding and support of the Congress and the State legislatures.

ENGLISH LANGUAGE ACQUISITION

Appropriations, 2007 .....	\$669,008,000
Budget estimate, 2008 .....	670,819,000
Committee recommendation .....	670,819,000

The Committee recommends an appropriation of \$670,819,000, the same as the budget request, for English language acquisition. The fiscal year 2007 appropriation was \$669,008,000.

The Department makes formula grants to States based on each State’s share of the Nation’s limited-English-proficient and recent immigrant student population. The program is designed to increase the capacity of States and school districts to address the needs of these students. The No Child Left Behind Act also requires that 6.5 percent of the appropriation be used to support national activities, which include professional development activities designed to increase the number of highly qualified teachers serving limited English proficient students; a National Clearinghouse for English Language Acquisition and Language Instructional Programs; and evaluation activities. The budget request includes language that would allow national activities funds to be available for 2 years. The Committee bill includes the requested language.

## SPECIAL EDUCATION

Appropriations, 2007 .....	\$11,802,867,000
Budget estimate, 2008 .....	11,485,147,000
Committee recommendation .....	12,330,374,000

The Committee recommends \$12,330,374,000 for special education programs authorized by the Individuals with Disabilities Education Act [IDEA]. The comparable fiscal year 2007 funding level is \$11,802,867,000 and the budget request includes \$11,485,147,000 for such programs.

*Grants to States*

The Committee recommends \$11,240,000,000 for special education grants to States, as authorized under part B of the IDEA. The comparable fiscal year 2007 funding level is \$10,782,961,000 and the budget request includes \$10,491,941,000. This program provides formula grants to assist States, Outlying Areas, and other entities in meeting the costs of providing special education and related services for children with disabilities. States pass along most of these funds to local educational agencies, but may reserve some for program monitoring, enforcement, technical assistance, and other activities.

The appropriation for this program primarily supports activities associated with the 2008–2009 academic year. Of the funds available for this program, \$5,315,800,000 will become available on July 1, 2008 and \$5,924,200,000 will become available on October 1, 2008. These funds will remain available for obligation until September 30, 2009.

The budget request includes language capping the Department of Interior set-aside at the prior year level, adjusted by the lower of the increase in inflation or the increase in the appropriation for grants to States. The Committee bill includes this language.

*Preschool Grants*

The Committee recommends \$380,751,000 for preschool grants. The comparable fiscal year 2007 funding level and the budget request both are \$380,751,000. The preschool grants program provides formula grants to States to assist them in making available special education and related services for children with disabilities aged 3 through 5. States distribute the bulk of the funds to local educational agencies. States must serve all eligible children with disabilities aged 3 through 5 and have an approved application under the Individuals with Disabilities Education Act.

*Grants for Infants and Families*

The Committee recommends \$450,000,000 for grants for the infants and families program under part C of the IDEA. The comparable fiscal year 2007 funding level is \$436,400,000 and the budget request includes \$423,067,000 for this purpose. This program provides formula grants to States, Outlying Areas and other entities to implement statewide systems of coordinated, comprehensive, multidisciplinary interagency programs to make available early intervention services to all children with disabilities, ages 2 and under, and their families.

*State Personnel Development*

The Committee recommends \$46,000,000 for the State personnel development program. Funds were not available under the fiscal year 2007 appropriation or the budget request for this purpose. This program focuses on the professional development needs in States by requiring that 90 percent of funds be used for professional development activities. The program supports grants to State educational agencies to help them reform and improve their personnel preparation and professional development related to early intervention, educational and transition services that improve outcomes for students with disabilities.

*Technical Assistance and Dissemination*

The Committee recommends \$48,903,000 for technical assistance and dissemination. The comparable fiscal year 2007 funding level is \$48,903,000 and the budget request includes \$48,902,000 for these activities. This program supports awards for technical assistance, model demonstration projects, the dissemination of useful information and other activities. Funding supports activities that are designed to improve the services provided under IDEA.

*Personnel Preparation*

The Committee recommends \$89,720,000 for the personnel preparation program. The comparable fiscal year 2007 funding level is \$89,720,000 and the budget request includes \$89,719,000 for this program. Funds support competitive awards to help address State-identified needs for personnel who are qualified to work with children with disabilities, including special education teachers and related services personnel. The program has requirements to fund several other broad areas including training for leadership personnel and personnel who work with children with low incidence disabilities, and providing enhanced support for beginning special educators.

*Parent Information Centers*

The Committee recommends \$27,000,000 for parent information centers. The comparable fiscal year 2007 funding level and the budget request both are \$25,704,000 for authorized activities. This program makes awards to parent organizations to support parent training and information centers, including community parent resource centers. These centers provide training and information to meet the needs of parents of children with disabilities living in the areas served by the centers, particularly underserved parents, and parents of children who may be inappropriately identified.

*Technology and Media Services*

The Committee recommends \$40,000,000 for technology and media services. The comparable fiscal year 2007 funding level is \$38,428,000 and the budget request includes \$25,063,000 for such activities. This program makes competitive awards to support the development, demonstration, and use of technology, and educational media activities of value to children with disabilities.

The Committee recommendation includes \$13,000,000 for Recording for the Blind and Dyslexic, Inc. [RFB&D] (Funding for this pro-

gram was requested by Senator Harkin). These funds support the continued development, production, and circulation of recorded textbooks, increased outreach activities to print-disabled students and their teachers, and accelerated use of digital technology.

The Committee also recommends \$1,500,000 for support of the Reading Rockets program, administered by the Greater Washington Educational Television Association (Funding for this program was requested by Senator Cochran).

*Special Olympics Education Programs*

The Committee recommendation includes \$8,000,000 for Special Olympics education programs. This is a new program in fiscal year 2008 and the budget request did not include any funds for this purpose. Under the Special Olympics Sport and Empowerment Act of 2004, the Secretary is authorized to provide financial assistance to Special Olympics for activities that promote the expansion of Special Olympics and for the design and implementation of education programs that can be integrated into classroom instruction and are consistent with academic content standards (Funding for the program was requested by Senator Harkin).

Within the Committee recommendation, \$3,000,000 shall be used to support the 2009 Special Olympics World Winter Games in Idaho (Funding for this program was requested by Senator Craig).

REHABILITATION SERVICES AND DISABILITY RESEARCH

Appropriations, 2007 .....	\$3,242,512,000
Budget estimate, 2008 .....	3,221,146,000
Committee recommendation .....	3,286,942,000

The Committee recommends \$3,286,942,000 for rehabilitation services and disability research. The comparable fiscal year 2007 funding level is \$3,242,512,000 and the budget request includes \$3,184,263,000 for programs in this account.

The authorizing statute for programs funded in this account, except for those authorized under the Assistive Technology Act, expired September 30, 2004. The program descriptions provided below assume the continuation of current law.

*Vocational Rehabilitation State Grants*

The Committee recommends \$2,874,043,000 for vocational rehabilitation grants to States. The Committee recommendation provides the full amount authorized by the Rehabilitation Act of 1973. The comparable funding level for fiscal year 2007 is \$2,837,160,000 for this program. The President's budget proposes to eliminate the increase provided by the consumer price index adjustment authorized by the authorizing statute. The Committee rejects this proposal.

Basic State grant funds assist States in providing a range of services to help persons with physical and mental disabilities prepare for and engage in meaningful employment. Authorizing legislation requires States to give priority to persons with the most significant disabilities. Funds are allotted to States based on a formula that takes into account population and per capita income. States must provide a 21.3-percent match of Federal funds, except

the State's share is 50 percent for the cost of construction of a facility for community rehabilitation program purposes.

The Rehabilitation Act requires that no less than 1 percent and not more than 1.5 percent of the appropriation in fiscal year 2008 for vocational rehabilitation State grants be set aside for grants for Indians. Service grants are awarded to Indian tribes on a competitive basis to help tribes develop the capacity to provide vocational rehabilitation services to American Indians with disabilities living on or near reservations.

#### *Client Assistance State Grants*

The Committee recommends \$11,782,000 for the client assistance State grants program. The comparable fiscal year 2007 funding level and the budget request both are \$11,782,000 for authorized activities.

The client assistance program funds State formula grants to assist vocational rehabilitation clients or client applicants in understanding the benefits available to them and in their relationships with service providers. Funds are distributed to States according to a population-based formula, except that increases in minimum grants are guaranteed to each of the 50 States, the District of Columbia, and Puerto Rico, and guaranteed to each of the outlying areas, by a percentage not to exceed the percentage increase in the appropriation. States must operate client assistance programs in order to receive vocational rehabilitation State grant funds.

#### *Training*

The Committee recommends \$38,438,000 for training rehabilitation personnel. The comparable fiscal year 2007 funding level and the budget request both are \$38,438,000 for training activities.

The purpose of this program is to ensure that skilled personnel are available to serve the rehabilitation needs of individuals with disabilities. It supports training, traineeships, and related activities designed to increase the numbers of qualified personnel providing rehabilitation services. The program awards grants and contracts to States and public or nonprofit agencies and organizations, including institutions of higher education, to pay all or part of the cost of conducting training programs. Long-term, in-service, short-term, experimental and innovative, and continuing education programs are funded, as well as special training programs and programs to train interpreters for persons who are deaf, hard of hearing and deaf-blind.

#### *Demonstration and Training Programs*

The Committee bill includes \$10,490,000 for demonstration and training programs for persons with disabilities. The comparable fiscal year 2007 funding level is \$6,511,000 and the budget request includes \$6,840,000 for authorized activities. This program awards grants to States and nonprofit agencies and organizations to develop innovative methods and comprehensive services to help individuals with disabilities achieve satisfactory vocational outcomes. Demonstration programs support projects for individuals with a wide array of disabilities.

The Committee recommendation includes \$1,000,000 for an award to the American Academy of Orthotists and Prosthetists for activities that further the purposes of the grant received by the Academy for the period beginning October 1, 2003 (Funding for this program was requested by Senator Harkin).

The Committee recommendation also includes bill language requiring that funds be provided to the following organizations in the amounts specified:

Project	Committee recommendation	Requested by
Alaska Center for the Blind and Visually Impaired, Anchorage, AK, for a partnership with the Lions Club to expand low vision services to Alaskans.	\$250,000	Stevens
Darden Rehabilitation Foundation, Gadsden, AL, for programs serving individuals with disabilities who seek to enter the work force.	150,000	Sessions
Kenai Peninsula Independent Living Center, Homer, AK, for the Total Recreation and Independent Living Services (TRAILS) project.	200,000	Stevens
National Ability Center, Park City, Utah, to provide transportation for individuals with cognitive and physical disabilities to participate independently in therapeutic recreational programs.	250,000	Bennett
Rainbow Center for Communicative Disorders, Blue Springs, MO, to expand programs available to individuals with severe disabilities.	300,000	Bond
Southeast Alaska Independent Living, Inc, Juneau, AK, to continue a joint recreation and employment project with the Tlingit-Haida Tribe.	200,000	Stevens
University of Northern Colorado National Center for Low-Incidence Disabilities, Greeley, CO, for support to local schools, educational professionals, families of infants, children, and youth with low-incidence disabilities.	200,000	Allard
Deaf Blind Service Center, Seattle, WA, to support the National Support Service Provider Pilot Project.	400,000	Murray
Enable America, Inc., Tampa, Florida, for civic/citizenship demonstration project for disabled adults.	600,000	Harkin
Special Olympics of Iowa, Des Moines, Iowa, for technology upgrades .....	100,000	Harkin

*Migrant and Seasonal Farmworkers*

The Committee recommends \$2,279,000 for migrant and seasonal farmworkers, the same amount as the comparable fiscal year 2007 funding level. The administration proposes eliminating separate funding for this program.

This program provides grants limited to 90 percent of the costs of the projects providing comprehensive rehabilitation services to migrant and seasonal farm workers with disabilities and their families. Projects also develop innovative methods for reaching and serving this population. The program emphasizes outreach, specialized bilingual rehabilitation counseling, and coordination of vocational rehabilitation services with services from other sources.

*Recreational Programs*

The Committee provides \$2,518,000 for recreational programs, the same amount as the comparable fiscal year 2007 funding level. The budget request does not include funding for this program.

Recreational programs help finance activities such as sports, music, dancing, handicrafts, and art to aid in the employment, mobility, and socialization of individuals with disabilities. Grants are awarded to States, public agencies, and nonprofit private organizations, including institutions of higher education. Grants are awarded for a 3-year period with the Federal share at 100 percent for the first year, 75 percent for the second year, and 50 percent for the

third year. Programs must maintain the same level of services over the 3-year period.

#### *Protection and Advocacy of Individual Rights*

The Committee recommends \$17,489,000 for protection and advocacy of individual rights. The comparable fiscal year 2007 funding level and the budget request both are \$16,489,000 for this purpose.

This program provides grants to agencies to protect and advocate for the legal and human rights of persons with disabilities who are not eligible for protection and advocacy services available through the Developmental Disabilities Assistance and Bill of Rights Act or the Protection and Advocacy for Individuals with Mental Illness Act.

#### *Projects with Industry*

The Committee recommends \$19,538,000 for projects with industry. The comparable fiscal year 2007 funding level is \$19,538,000 and the administration proposes eliminating separate funding for this program.

The projects with industry [PWI] program promotes greater participation of business and industry in the rehabilitation process. PWI provides training and experience in realistic work settings to prepare individuals with disabilities for employment in the competitive job market. Postemployment support services are also provided. The program supports grants to a variety of agencies and organizations, including corporations, community rehabilitation programs, labor and trade associations, and foundations.

#### *Supported Employment State Grants*

The Committee recommends \$29,700,000 for the supported employment State grant program. The comparable fiscal year 2007 funding level is \$29,700,000 and the administration proposes eliminating separate funding for this program.

This program assists the most severely disabled individuals by providing the ongoing support needed to obtain competitive employment. Short-term vocational rehabilitation services are augmented with extended services provided by State and local organizations. Federal funds are distributed on the basis of population.

#### *Independent Living State Grants*

The Committee recommends \$22,588,000 for independent living State grants. The comparable funding level for fiscal year 2007 and the budget request both are \$22,588,000 for authorized activities.

The independent living State formula grants program provides funding to improve independent living services, support the operation of centers for independent living, conduct studies and analysis, and provide training and outreach.

#### *Independent Living Centers*

The Committee recommends \$74,638,000 for independent living centers. The comparable fiscal year 2007 funding level and the budget request both are \$74,638,000 for the centers.

These funds support consumer-controlled, cross-disability, non-residential, community-based centers that are designed and oper-

ated within local communities by individuals with disabilities. These centers provide an array of independent living services.

#### *Independent Living Services for Older Blind Individuals*

The Committee provides \$32,895,000 for independent living services to older blind individuals. The comparable fiscal year 2007 funding level and the budget request both are \$32,895,000 for these activities. Through this program, assistance is provided to persons aged 55 or older to adjust to their blindness, continue living independently and avoid societal costs associated with dependent care. Services may include the provision of eyeglasses and other visual aids, mobility training, braille instruction and other communication services, community integration, and information and referral. These services help older individuals age with dignity, continue to live independently and avoid significant societal costs associated with dependent care. The services most commonly provided by this program are daily living skills training, counseling, the provision of low-vision devices community integration, information and referral, communication devices, and low-vision screening.

#### *Program Improvement Activities*

The Committee recommends \$633,000 for program improvement activities. The comparable fiscal year 2007 funding level is \$835,000 and the budget request includes \$633,000 for authorized activities. In fiscal year 2008, funds for these activities will continue to support technical assistance efforts to improve the efficiency and effectiveness of the vocational rehabilitation program and improve accountability efforts. The funds provided are sufficient to support technical assistance and other ongoing program improvement activities, such as improved program performance measurement.

#### *Evaluation*

The Committee recommends \$1,695,000 for evaluation activities. The comparable fiscal year 2007 funding level is \$1,473,000 and the budget request includes \$1,973,000 for such activities. The Committee recommendation continues to support a new multi-year study of the State Vocational Rehabilitation Services program.

These funds support evaluations of the impact and effectiveness of programs authorized by the Rehabilitation Act. The Department awards competitive contracts for studies to be conducted by persons not directly involved with the administration of Rehabilitation Act programs.

#### *Helen Keller National Center*

The Committee recommends \$9,511,000 for the Helen Keller National Center for Deaf-Blind Youth and Adults. The comparable fiscal year 2007 funding level is \$8,511,000 and the budget request includes \$8,011,000 for this purpose.

The Helen Keller National Center consists of a national headquarters in Sands Point, New York, with a residential training and rehabilitation facility where deaf-blind persons receive intensive specialized services; a network of 10 regional field offices which provide referral and counseling assistance to deaf-blind persons;

and an affiliate network of agencies. The center serves approximately 110 persons with deaf-blindness at its headquarters facility and provides field services to approximately 2,000 individuals and families and approximately 1,100 organizations.

#### *National Institute on Disability and Rehabilitation Research*

The Committee recommends \$106,705,000 for the National Institute on Disability and Rehabilitation Research [NIDRR]. The comparable fiscal year 2007 funding level and the budget request both are \$106,705,000 for authorized activities.

NIDRR develops and implements a comprehensive and coordinated approach to the conduct of research, demonstration projects, and related activities that enable persons with disabilities to better function at work and in the community, including the training of persons who provide rehabilitation services or who conduct rehabilitation research. The Institute awards competitive grants to support research in federally designated priority areas, including rehabilitation research and training centers, rehabilitation engineering research centers, research and demonstration projects, and dissemination and utilization projects. NIDRR also supports field-initiated research projects, research training, and fellowships.

The Committee encourages the National Institute on Disability and Rehabilitation Research to continue to pursue CFS-related research proposals through its investigator-initiated and other grants programs, including sponsoring studies that will illuminate the nature of disability in CFS, particularly the predominant feature of post-exertional relapse, as well as strategies to support the improved function and rehabilitation of CFS patients.

#### *Assistive Technology*

The Committee recommends \$32,000,000 for assistive technology. The comparable fiscal year 2007 funding level is \$30,452,000 and the budget request includes \$26,111,000 for activities authorized by the Assistive Technology Act of 1998.

The Assistive Technology program is designed to improve occupational and educational opportunities and the quality of life for people of all ages with disabilities through increased access to assistive technology services and devices. The program supports various activities that help States to develop comprehensive, consumer-responsive statewide programs that increase access to, and the availability of, assistive technology devices and services.

The Committee recommendation includes \$26,377,000 for State grant activities authorized under section 4, \$4,570,000 for protection and advocacy systems authorized by section 5, and \$1,053,000 for technical assistance activities authorized under section 6.

The Committee encourages States to use the additional funds provided for State grant activities authorized under section 4 for State-level alternative financing programs. The Committee looks forward to reviewing the Department's mandated report on State implementation of this program, particularly the activities related to State financing.

## SPECIAL INSTITUTIONS FOR PERSONS WITH DISABILITIES

## AMERICAN PRINTING HOUSE FOR THE BLIND

Appropriations, 2007 .....	\$17,573,000
Budget estimate, 2008 .....	17,573,000
Committee recommendation .....	22,000,000

The Committee recommends \$22,000,000 for the American Printing House for the Blind [APH]. The comparable fiscal year 2007 funding level and budget request both are \$17,573,000 for this purpose.

This appropriation helps support the American Printing House for the Blind, which provides educational materials to students who are legally blind and enrolled in programs below the college level. The Federal subsidy provides more than 60 percent of APH's total sales income. Materials are distributed free of charge to schools and States through per capita allotments based on the total number of students who are blind. Materials provided include textbooks and other educational aids in braille, large type, and recorded form and computer applications. Appropriated funds may be used for staff salaries and expenses, as well as equipment purchases and other acquisitions consistent with the purpose of the Act to Promote the Education of the Blind.

In addition to its ongoing activities, the Individuals with Disabilities Education Improvement Act assigned to the American Printing House for the Blind the responsibility of establishing and maintaining a National Instructional Materials Access Center. The Committee bill includes language under the special education account to improve the operation and performance of the National Instructional Materials Access Center [NIMAC]. The Committee supports the NIMAC, as established in section 674(e) of Public Law 108-446, which serves as the central repository for electronic files used in reproducing instructional materials in specialized formats for students with print disabilities. The intent of the statute is to apply this subsection only to materials with an original publication date of July 19, 2006 and later.

## NATIONAL TECHNICAL INSTITUTE FOR THE DEAF

Appropriations, 2007 .....	\$56,141,000
Budget estimate, 2008 .....	56,262,000
Committee recommendation .....	59,000,000

The Committee recommends \$59,000,000 for the National Technical Institute for the Deaf [NTID]. The comparable fiscal year 2007 funding level is \$56,141,000 and the budget request includes \$56,262,000 for this purpose. Within the Committee recommendation, \$1,705,000 is available for improvements to the campus infrastructure of NTID.

The Institute, located on the campus of the Rochester Institute of Technology, was created by Congress in 1965 to provide a residential facility for postsecondary technical training and education for persons who are deaf. NTID also provides support services for students who are deaf, trains professionals in the field of deafness, and conducts applied research. At the discretion of the Institute, funds may be used for the Endowment Grant program.

## GALLAUDET UNIVERSITY

Appropriations, 2007 .....	\$106,998,000
Budget estimate, 2008 .....	106,998,000
Committee recommendation .....	111,000,000

The Committee recommends \$111,000,000 for Gallaudet University. The comparable fiscal year 2007 funding level is \$106,998,000 and the budget request includes \$106,998,000 for the university.

Gallaudet University is a private, nonprofit institution offering undergraduate, and continuing education programs for students who are deaf, as well as graduate programs in fields related to deafness for students who are hearing and deaf. The University conducts basic and applied research related to hearing impairments and provides public service programs for the deaf community.

The Model Secondary School for the Deaf serves as a laboratory for educational experimentation and development, disseminates curricula, materials, and models of instruction for students who are deaf, and prepares adolescents who are deaf for postsecondary academic or vocational education or the workplace. The Kendall Demonstration Elementary School develops and provides instruction for children from infancy through age 15.

The budget request includes \$600,000 earmarked in bill language to evaluate the education programs and administrative operations of the University. The Committee recommendation includes the requested funding and language for these activities.

## CAREER, TECHNICAL AND ADULT EDUCATION

Appropriations, 2007 .....	\$1,992,170,000
Budget estimate, 2008 .....	1,189,808,000
Committee recommendation .....	1,894,788,000

The Committee recommendation includes a total of \$1,894,788,000 for career, technical and adult education. The comparable funding level in fiscal year 2007 is \$1,992,170,000 and the budget request includes \$1,189,808,000 for this account. The recommendation consists of \$1,294,306,000 for career and technical education, \$577,712,000 for adult education and \$22,770,000 for other activities.

*Career and Technical Education*

The Committee recommends \$1,294,306,000 for career and technical education. The comparable fiscal year 2007 funding level is \$1,296,306,000 and the budget request includes \$610,000,000 for these activities.

*State Grants.*—The Committee recommends \$1,181,553,000 for State grants, the same amount as the comparable fiscal year 2007 funding level. The budget request includes \$600,000,000 for this purpose. Funds provided under the State grant program assist States, localities, and outlying areas to expand and improve their programs of career and technical education and provide equal access to career and technical education for populations with special needs. Persons assisted range from secondary students in prevocational courses through adults who need retraining to adapt to changing technological and labor market conditions. Funds are

distributed according to a formula based on State population and State per capita income, with hold harmless provisions for small States and for a fiscal year 1998 base guarantee.

Under the Indian and Hawaiian Natives programs, competitive grants are awarded to federally recognized Indian tribes or tribal organizations and to organizations primarily serving and representing Hawaiian Natives for services that are in addition to services such groups are eligible to receive under other provisions of the Perkins Act.

Of the funds available for this program, \$390,553,000 will become available on July 1, 2008 and \$791,000,000 will become available on October 1, 2008. These funds will remain available for obligation until September 30, 2009.

*Tech-Prep Education State Grants.*—The Committee recommends \$104,753,000 for tech-prep programs. The comparable fiscal year 2007 funding level is \$104,753,000, while the budget request proposes to eliminate funding for this program. This program is designed to link academic and career and technical education and to provide a structural link between secondary schools and postsecondary education institutions. Funds are distributed to the States through the same formula as the State grant program. States then make planning and demonstration grants to consortia of local educational agencies and postsecondary institutions to develop and operate model 4-year programs that begin in high school and provide students with the mathematical, science, communication, and technological skills needed to earn a 2-year associate degree or 2-year certificate in a given occupational field.

*National Programs.*—The Committee recommends \$8,000,000 for national research programs and other national activities. The comparable fiscal year 2007 funding level and the budget request both are \$10,000,000 for this program.

Funds will be used to support the national research center on career and technical education, as well as other activities that will help improve career and technical education programs in high schools and community colleges.

#### ADULT EDUCATION

The Committee recommends \$577,712,000 for adult education. The comparable fiscal year 2007 funding level is \$579,563,000 and the budget request includes \$579,808,000 for this purpose. The authorizing statute for adult education programs expired on September 30, 2004. Descriptions of these programs provided below assume the continuation of current law.

The Committee recognizes the importance of the Adult Education and Family Literacy Act programs. To ensure that funding for these programs is benefiting as many students as possible, the Committee encourages the Secretary to evaluate and report on whether the amount of funding for State grants that is allowed to be set aside for State leadership activities and State program administration is appropriate and how these set-asides impact the assistance reaching students. The Committee expects the Department to include the requested information in the fiscal year 2009 budget justification.

*Adult Education State Programs.*—For adult education State programs, the Committee recommends \$564,074,000. The comparable fiscal year 2007 funding level is \$563,975,000 and the budget request includes \$564,074,000 for authorized activities. These funds are used by States for programs to enable economically disadvantaged adults to acquire basic literacy skills, to enable those who so desire to complete a secondary education, and to make available to adults the means to become more employable, productive, and responsible citizens.

The Committee recommendation continues the English literacy and civics education State grants set aside within the adult education State grant appropriation. Within the total, \$67,896,000 is available to help States or localities affected significantly by immigration and large limited-English populations to implement programs that help immigrants acquire English literacy skills, gain knowledge about the rights and responsibilities of citizenship and develop skills that will enable them to navigate key institutions of American life.

*National Leadership Activities.*—The Committee recommends \$7,000,000 for national leadership activities. The comparable funding level for fiscal year 2007 is \$9,005,000 and the budget request includes \$9,096,000 for this purpose. Under this program, the Department supports applied research, development, dissemination, evaluation and program improvement activities to assist States in their efforts to improve the quality of adult education programs.

*National Institute for Literacy.*—The Committee recommends \$6,638,000 for the National Institute for Literacy, authorized under section 242 of the Adult Education and Family Literacy Act. The comparable fiscal year 2007 funding level is \$6,583,000 and the budget request includes \$6,638,000 for this purpose. The Institute provides national leadership on issues related to literacy, coordinates literary services and policy, and serves as a national resource for adult education and literacy programs. The center also engages in a variety of capacity-building activities that support the development of State, regional, and national literary services.

#### *Smaller Learning Communities*

The Committee does not recommend additional funds for this program. The comparable fiscal year 2007 funding level is \$93,531,000 and the budget request does not include any funds for this purpose. This program has supported competitive grants to local educational agencies to enable them to create smaller learning communities in large schools. Funds have been used to study, research, develop and implement strategies for creating smaller learning communities, as well as professional development for staff. Two types of grants were made under this program: 1-year planning grants, which help LEAs plan smaller learning communities and 3-year implementation grants, which help create or expand such learning environments.

#### *State Grants for Incarcerated Youth Offenders*

The Committee recommends \$22,770,000 for education and training for incarcerated youth offenders, the same as the comparable funding level for fiscal year 2007. The administration proposes to

eliminate funding for these activities. This program provides grants to State correctional education agencies to assist and encourage incarcerated youth to acquire functional literacy, life and job skills, through the pursuit of a postsecondary education certificate or an associate of arts or bachelor's degree. Grants also assist correction agencies in providing employment counseling and other related services that start during incarceration and continue through prerelease and while on parole. Under current law, each student is eligible for a grant of not more than \$1,500 annually for tuition, books, and essential materials, and not more than \$300 annually for related services such as career development, substance abuse counseling, parenting skills training, and health education. In order to participate in a program, a student must be no more than 25 years of age and be eligible to be released from prison within 5 years. Youth offender grants are for a period not to exceed 5 years, 1 year of which may be devoted to study in remedial or graduate education.

STUDENT FINANCIAL ASSISTANCE

Appropriations, 2007 .....	\$15,542,456,000
Budget estimate, 2008 .....	14,394,492,000
Committee recommendation .....	16,368,883,000

The Committee recommends an appropriation of \$16,368,883,000 for student financial assistance. Program authorities and descriptions assume the continuation of current law.

*Federal Pell Grant Program*

For Pell grant awards in the 2008/2009 academic year, the Committee recommends \$14,487,000,000 to maintain the record maximum Pell grant award level of \$4,310. The appropriation provided in this bill will maintain the current grant level without creating a shortfall in the program.

Pell grants provide need-based financial assistance that helps low-and middle-income undergraduate students and their families defray a portion of the costs of postsecondary education and vocational training. Awards are determined according to a statutory need analysis formula that takes into account a student's family income and assets, household size, and the number of family members, excluding parents, attending postsecondary institutions. Pell grants are considered the foundation of Federal postsecondary student aid.

The President has proposed increasing the maximum Pell grant to \$4,600 in fiscal year 2008 and has included legislative language with proposed mandatory savings to pay for the increase. The Committee agrees with that proposal and has included sufficient funds to maintain the Pell grant at the fiscal year 2007 level of \$4,310 and plans to work in concert with the authorizing committees to ensure that the maximum Pell grant is increased to no less than the \$4,600 level this year.

*Federal Supplemental Educational Opportunity Grants*

The Committee recommends \$770,933,000 for Federal supplemental educational opportunity grants [SEOG], the same as the fiscal year 2007 level. The budget did not include funds for this pro-

gram. This program provides funds to postsecondary institutions for need-based grants to undergraduate students. Institutions must contribute 25 percent towards SEOG awards, which are subject to a maximum grant level of \$4,000. School financial aid officers have flexibility to determine student awards, though they must give priority to Pell grant recipients with exceptional need.

#### *Federal Work-Study Programs*

The Committee bill provides \$980,492,000 for the Federal work-study program, the same amount as the budget request. The comparable fiscal year 2007 funding level is \$980,354,000.

This program provides grants to more than 3,300 institutions to help an estimated 880,000 undergraduate, graduate, and professional students meet the costs of postsecondary education through part-time employment. Work-study jobs must pay at least the Federal minimum wage and institutions must provide at least 25 percent of student earnings. Institutions also must use at least 7 percent of their grants for community-service jobs.

#### *Federal Perkins Loans*

The Federal Perkins loan program supports student loan revolving funds built up with capital contributions to nearly 1,900 participating institutions. Institutions use these revolving funds, which also include Federal capital contributions [FCC], institutional contributions equal to one-third of the FCC, and student repayments, to provide low-interest (5 percent) loans that help financially needy students pay the costs of postsecondary education.

The Committee recommends \$65,471,000 for loan cancellations, the same amount as the comparable funding level for fiscal year 2007. The budget request did not include any funds for this purpose. These funds reimburse institutional revolving funds on behalf of borrowers whose loans are cancelled in exchange for statutorily specified types of public or military service, such as teaching in a qualified low-income school, working in a Head Start Program, serving in the Peace Corps or VISTA, or nurses and medical technicians providing health care services.

The Committee bill does not include any funds for Federal Perkins loans capital contributions. The comparable fiscal year 2007 funding level did not include such funds and the budget request does not provide any funds for this purpose.

#### *Leveraging Educational Assistance Partnership Program*

For the leveraging educational assistance partnership [LEAP] program, the Committee recommends \$64,987,000 the same amount as the comparable funding level for fiscal year 2007. The budget proposes to eliminate funding for this program.

The leveraging educational assistance partnership program provides a Federal match to States as an incentive for providing need-based grant and work-study assistance to eligible postsecondary students.

## STUDENT AID ADMINISTRATION

Appropriations, 2007 .....	\$717,950,000
Budget estimate, 2008 .....	708,216,000
Committee recommendation .....	708,216,000

The Committee recommends \$708,216,000 for the Student Aid Administration account, the same as the budget request, for activities funded under this account, as reauthorized by the Higher Education Reconciliation Act of 2005. These funds are available until expended. That act reclassified most of the administrative costs of the Student Aid Account that were classified as mandatory spending through fiscal year 2006.

Funds appropriated for the Student Aid Administration Account will support the Department's student aid management expenses. The Office of Federal Student Aid and Office of Postsecondary Education have primary responsibility for administering Federal student financial assistance programs.

The Committee is concerned that there have been a number of recent reports of abuses by lenders in the student loan program. Those abuses include questionable ties between lenders and financial aid officials, including reports of school officials receiving gifts and other financial inducements to include a lender on the schools preferred lender list. The Committee is concerned that lax Federal oversight by the Department of Education has made the situation worse. The Committee commends the Secretary for taking the first step toward addressing this issue with the recent issuance of regulations but is disappointed that nothing was done by the Department earlier in its administration.

## HIGHER EDUCATION

Appropriations, 2007 .....	\$1,951,053,000
Budget estimate, 2008 .....	1,845,103,000
Committee recommendation .....	2,028,302,000

The Committee recommends an appropriation of \$2,028,302,000 for higher education programs.

*Aid for Institutional Development*

The Committee recommends \$507,434,000 for aid for institutional development authorized by titles III and V of the Higher Education Act. The comparable funding level for fiscal year 2007 is \$505,814,000.

*Strengthening Institutions.*—The Committee bill includes \$79,535,000, the same as the fiscal year 2007 comparable level. The part A program supports competitive, 1-year planning and 5-year development grants for institutions with a significant percentage of financially needy students and low educational and general expenditures per student in comparison with similar institutions. Applicants may use part A funds to develop faculty, strengthen academic programs, improve institutional management, and expand student services. Institutions awarded funding under this program are not eligible to receive grants under other sections of part A or part B.

*Hispanic-Serving Institutions [HSI].*—The Committee recommends \$94,914,000, the same as the fiscal year 2007 comparable

level, for institutions at which Hispanic students make up at least 25 percent of enrollment. Institutions applying for title V funds must meet the regular part A requirements. Funds may be used for acquisition, rental or lease of scientific or laboratory equipment, renovation of instructional facilities, development of faculty, support for academic programs, institutional management, and purchase of educational materials. Title V recipients are not eligible for other awards provided under title III, parts A and B.

*Strengthening Historically Black Colleges and Universities.*—The Committee recommends \$238,095,000 for part B grants, the same as the fiscal year 2007 level. The part B strengthening historically black colleges and universities [HBCU] program makes formula grants to HBCUs that may be used to purchase equipment, construct and renovate facilities, develop faculty, support academic programs, strengthen institutional management, enhance fundraising activities, provide tutoring and counseling services to students, and conduct outreach to elementary and secondary school students. The minimum allotment is \$500,000 for each eligible institution. Part B recipients are not eligible for awards under part A.

*Strengthening Historically Black Graduate Institutions.*—The Committee recommends \$57,915,000 for the part B, section 326 program, the same as the fiscal year 2007 level. The section 326 program provides 5-year grants to strengthen historically black graduate institutions [HBGIs]. Grants may be used for any part B purpose and to establish an endowment.

*Strengthening Alaska Native and Native Hawaiian-Serving Institutions.*—The Committee recommends \$12,500,000 for this program, an increase of \$715,000 over the fiscal year 2007 level. The purpose of this program is to improve and expand the capacity of institutions serving Alaska Native and Native Hawaiian students. Funds may be used to plan, develop, and implement activities that encourage: faculty and curriculum development; better fund and administrative management; renovation and improvement of educational facilities; student services; and the purchase of library and other educational materials. As initial funding cycles expire, the Committee encourages the Department to use simplified application forms to permit participating institutions to obtain continuation funding for successful programs funded under this authority (Funding for this program was requested by Senators Inouye and Stevens).

*Strengthening Tribally Controlled Colleges and Universities.*—The Committee recommends \$24,475,000 for strengthening tribal colleges and universities [TCUs], an increase of \$905,000 over the fiscal year 2007 level. Tribal colleges and universities rely on a portion of the funds provided to address developmental needs, including faculty development, curriculum and student services.

In past years, the Committee has supported a competitive grant program to assist institutions in addressing long overdue and high-priority infrastructure and facilities requirements. The Committee intends for the funds provided to be used to support continuation of existing basic grants and new planning or implementation grant awards. The remaining funds shall be available for grants for ren-

ovation and construction of facilities to continue to address urgently needed facilities repair and expansion.

*International Education and Foreign Language Studies*

The bill includes a total of \$105,751,000 for international education and foreign language programs, which is the same as the fiscal year 2007 level.

The Committee bill includes language allowing funds to be used to support visits and study in foreign countries by individuals who plan to utilize their language skills in world areas vital to the United States national security in the fields of government, international development and the professions. Bill language also allows up to 1 percent of the funds provided to be used for program evaluation, national outreach, and information dissemination activities. This language is continued from last year's bill and was proposed in the budget request.

*Domestic Programs.*—The Committee recommends \$91,541,000 for domestic program activities related to international education and foreign language studies, including international business education, under title VI of the HEA. This is the same as the fiscal year 2007 level. Domestic programs include national resource centers, undergraduate international studies and foreign language programs, international research and studies projects, international business education projects and centers, American overseas research centers, language resource centers, foreign language and area studies fellowships, and technological innovation and cooperation for foreign information access.

*Overseas Programs.*—The bill includes \$12,610,000 for overseas programs authorized under the Mutual Educational and Cultural Exchange Act of 1961, popularly known as the Fulbright-Hays Act, the same as the fiscal year 2007 level. Under these overseas programs, grants are provided for group and faculty research projects abroad, doctoral dissertation research abroad, and special bilateral projects. Unlike other programs authorized by the Fulbright-Hays Act and administered by the Department of State, these Department of Education programs focus on training American instructors and students in order to improve foreign language and area studies education in the United States.

*Institute for International Public Policy.*—The Committee bill recommends \$1,600,000 for the Institute for International Public Policy. This program is designed to increase the number of minority individuals in foreign service and related careers by providing a grant to a consortium of institutions for undergraduate and graduate level foreign language and international studies. An institutional match of 50 percent is required.

*Fund for the Improvement of Postsecondary Education*

The Committee recommends \$81,844,000 for the Fund for the Improvement of Postsecondary Education [FIPSE], an increase of \$59,856,000 over the fiscal year 2007 level. FIPSE stimulates improvements in education beyond high school by supporting exemplary, locally developed projects that have potential for addressing problems and recommending improvements in postsecondary education. The Fund is administered by the Department with advice

from an independent board and provides small, competitive grants and contracts to a variety of postsecondary institutions and agencies, including 2- and 4-year colleges and universities, State education agencies, community-based organizations, and other non-profit institutions and organizations concerned with education beyond high school.

The Committee recommendation includes \$15,198,000 the full amount requested for the comprehensive program, as well as funds for international consortia programs.

The Committee recommendation also includes bill language requiring that funds be provided to the following organizations in the amounts specified:

Project	Committee recommendation	Requested by
AIB College of Business, Des Moines, IA, for scholarships in captioning and court reporting.	\$500,000	Harkin, Grassley
Aims Community College, Greeley, CO, for equipment for career training in the health professions.	50,000	Salazar
Albertson College of Idaho, Caldwell, ID, for acquisition of equipment, technology and library upgrade.	350,000	Craig, Crapo
Albright College, Reading, PA, for laboratory equipment acquisition .....	100,000	Specter
Alpena Community College, Alpena, MI, for curriculum development for the Rural Communications Initiative.	300,000	Stabenow, Levin
Alvernia College, Reading, PA, for scholarships and nursing education programs.	100,000	Specter
Armstrong Atlantic State University, Savannah, GA, for acquisition of equipment and technology upgrades for a distance learning classroom.	100,000	Chambliss, Isakson
Assumption College, Worcester, MA .....	150,000	Kennedy, Kerry
Benjamin Franklin Institute of Technology, Boston, MA, for educational equipment and curriculum development to support medical technology professional training programs.	250,000	Kennedy, Kerry
Bristol Community College, Fall River, MA, to expand adult literacy and career development academic programs.	200,000	Kennedy, Kerry
Bucknell University, Lewisburg, PA, for laboratory equipment acquisition .....	100,000	Specter
California Community Colleges, Sacramento, CA, for Math and Science Teacher Initiative.	200,000	Feinstein
California University of Pennsylvania, California, PA, for curriculum development and teacher training to enhance math and science instruction.	100,000	Specter
Cardinal Stritch University, Milwaukee, WI, to establish a bachelors of science nurse degree program.	325,000	Kohl
Carroll College, Helena, MT, for curriculum development in Civil Engineering ....	250,000	Baucus, Tester
Cedar Crest College, Allentown, PA, for nursing education programs .....	100,000	Specter
Central Maine Community College, Auburn, ME, for nursing education expansion and outreach.	150,000	Collins, Snowe
Clinton School of Public Service at the University of Arkansas, Little Rock, AR, for curriculum development.	1,000,000	Lincoln, Pryor
College Success Foundation, Issaquah, WA, for matching students to scholarships.	300,000	Cantwell
Community College of Southern Nevada, Las Vegas, NV, to purchase equipment and other support for Internet-based course offerings.	750,000	Reid
Connecticut State University, Hartford, CT, for nursing education programs .....	400,000	Dodd, Lieberman
Dakota Wesleyan University, Mitchell, SD, for archiving of former Senator George McGovern's papers.	350,000	Johnson, Thune
Dartmouth College, Hanover, NH, for a new interdisciplinary initiative on engineering and medicine.	300,000	Gregg
Deaf West Theatre, North Hollywood, CA, for cultural experiences for the deaf ..	250,000	Boxer, Harkin
Dean College, Franklin, MA, to develop programs and procure equipment for the Learning Center.	235,000	Kennedy, Kerry
Delaware County Community College, Media, PA, for laboratory equipment upgrades and acquisition.	75,000	Specter
Dillard University, New Orleans, LA, to establish a recruitment and training program for nursing assistants and home health aides.	750,000	Landrieu, Vitter

Project	Committee recommendation	Requested by
Duquesne University of the Holy Spirit, Pittsburgh, PA, for equipment and technology acquisition for a supercomputing facility.	100,000	Specter
East Stroudsburg University, East Stroudsburg, PA, for forensic science education programs.	100,000	Specter
Eastern Iowa Community College, Davenport, IA, for the creation of a center on sustainable energy, including equipment.	350,000	Harkin, Grassley
Eastern New Mexico University, Portales, NM, for technological equipment upgrades.	1,000,000	Domenici
Edinboro University of Pennsylvania, Edinboro, PA, to support a computer forensics training program at its Western Pennsylvania High Tech Crime Training Center.	100,000	Specter
Emerson College, Boston, MA, for educational equipment and program development.	400,000	Kennedy, Kerry
Emmanuel College, Boston, MA, for the procurement of educational equipment and program development.	300,000	Kennedy, Kerry
Flathead Valley Community College, Kalispell, MT, for program development at the Center for Community Entrepreneurship Education.	350,000	Baucus, Tester
Focus: HOPE Center for Advanced Technologies Experiential Learning Labs, Detroit, MI, to establish an experiential learning laboratory.	500,000	Levin, Stabenow
Franklin Pierce College, Rindge, NH, for technology-based educational programs and services.	400,000	Gregg
George Meany Center for Labor Studies—the National Labor College, Silver Spring, MD, for curriculum development.	900,000	Harkin
Georgia State University, Atlanta, GA, for science education partnership programs between colleges, universities, schools and life science community educational organizations.	100,000	Chambliss
Golden Apple Foundation, Chicago, IL, for a math and science teacher training initiative.	500,000	Durbin
Henry Kuualoha Giugni Archives at the University of Hawaii at Manoa, to establish an archival facility of historical Native Hawaiian records and stories.	250,000	Inouye, Akaka
Hermiston, Hermiston, OR, to support programs and systems for Latino education.	300,000	Smith
Holyoke Community College, Holyoke, MA, for educational equipment and information technology.	200,000	Kennedy, Kerry
Houston Community College, Houston, TX, for the Accelerated Nursing Proficiency Center.	150,000	Hutchison
Hudson Valley Community College, Troy, NY, to expand the nursing program ....	500,000	Clinton, Schumer
Huntington Junior College, Huntington, WV, for the expansion of the captioning program.	1,080,000	Byrd
Indiana University of Pennsylvania, Indiana, PA, for equipment acquisition and curriculum development for a mine safety course.	100,000	Specter
Iowa Lakes Community College, Estherville, IA, for equipment to support the Sustainable Energy Education program.	250,000	Harkin, Grassley
Kansas City Kansas Community College, Kansas City, KS, to provide workforce development training to improve economic conditions and to reduce prisoner recidivism.	500,000	Brownback
Keystone College, LaPlume, PA, for classroom and laboratory equipment upgrades and acquisition.	100,000	Specter
King's College, Wilkes-Barre, PA, for curriculum and professional development for its Center for Community Engagement and Learning.	100,000	Specter, Casey
Lackawanna College, Scranton, PA, for laboratory equipment and technology upgrades and acquisition.	100,000	Specter
Lesley University, Cambridge, MA, for educational and research equipment to support new science instruction laboratories.	250,000	Kennedy, Kerry
Lewis-Clark State College, Lewiston, ID, to continue and expand the American Indian Students in Leadership of Education (AISLE) program.	250,000	Craig, Crapo
Lincoln University, Lincoln University, PA, for campus-wide technology upgrades and wiring.	100,000	Specter
Lock Haven University, Lock Haven, PA, to provide professional development partnerships and related services.	100,000	Specter
Maryland Association of Community Colleges, Annapolis, MD, to expand and improve nursing programs at Maryland's community colleges.	2,500,000	Mikulski
Massachusetts College of Pharmacy, Manchester, NH, for Health Professionals Training.	200,000	Sununu

Project	Committee recommendation	Requested by
Messiah College, Grantham, PA, for wireless technology acquisition and technology infrastructure improvements.	100,000	Specter
Metro State College, Denver, CO, for training and equipment acquisition .....	150,000	Allard
MidAmerica Nazarene University, Olathe, KS, for equipment acquisition to expand distance education for teachers in western Kansas.	300,000	Brownback
Middle Tennessee State University, Murfreesboro, TN, for the comprehensive math and science teacher training program.	500,000	Alexander
Miles Community College, Miles City, MT, for curriculum development and equipment for the Pathways to Careers in Health project.	350,000	Baucus, Tester
Mississippi State University, Mississippi State, MS, for a leadership training program at the Appalachian Leadership Honors Program.	100,000	Cochran
Mississippi State University, Mississippi State, MS, for acquisition of equipment and curriculum development at the Wise Center-Broadcast Facility Conversion to Digital.	1,100,000	Cochran
Missouri State University, Springfield, MO, for program development and expansion, equipment and technology for the Distance Learning Project on the West Plains Campus.	1,000,000	Bond
Montana Committee for the Humanities, Missoula, MT, to continue civic educational programs.	100,000	Baucus
Montana State University-Billings, Billings, MT, for the Montana Energy Workforce Training Center.	145,000	Tester
Montana State University-Billings, Billings, MT, to develop job-training programs.	200,000	Baucus
Montana State University-Billings, Billings, MT, to expand professional development education programs for the health care industry.	200,000	Baucus, Tester
Moravian College, Bethlehem, PA, for equipment and technology acquisition and curriculum development for a science initiative.	100,000	Specter
Morehouse College, Atlanta, GA, to establish a research initiative to improve college graduation of minority students.	100,000	Chambliss, Isakson
Mott Community College—Center for Advanced Manufacturing, Flint, MI, for a clearinghouse and pilot program for new technology.	500,000	Levin, Stabenow
Muhlenberg College, Allentown, PA, for education and outreach services to support undergraduate students with disabilities.	100,000	Specter
Nevada State College, Henderson, NV, for math and science teacher initiatives.	325,000	Reid
New Hampshire Community Technical College System, Concord, NH, to expand and modernize engineering technology programs.	300,000	Sununu, Gregg
New Hampshire Community Technical College System, Concord, NH, to standardize technology and learning across seven community colleges.	250,000	Gregg
North Dakota State College of Science, Wahpeton, ND, to train students in nanoscience and other advanced technologies.	1,000,000	Dorgan, Conrad
Northeast Community College, Norfolk, NE, for nurse training, including the purchase of equipment.	200,000	Hagel, Ben Nelson
Northern Essex Community College, Lawrence, MA, for equipment for allied health program.	245,000	Kennedy, Kerry
Northern Kentucky University, Highland Heights, KY, for the nursing education program.	150,000	Bunning
Northern Kentucky University, Highland Heights, KY, for the Infrastructure Management Institute.	500,000	McConnell
Northern Rockies Educational Services, Twin Bridges, MT, to develop Taking Technology to the Classroom program.	100,000	Baucus
Northwestern State University of Louisiana, Natchitoches, LA, for a nursing education program.	200,000	Landrieu, Vitter
Oregon Coast Community College, Nursing Program, Newport, OR, for equipment acquisition for a simulation/skills lab for the nursing program.	100,000	Smith
Pennsylvania Highlands Community College, Johnstown, PA, for laboratory equipment and technology upgrades and acquisition.	100,000	Specter
Peru State College, Peru, NE, to support the Adopt-a-High-School program for first generation college students in Southeastern Nebraska.	100,000	Hagel, Ben Nelson
Philadelphia University, Philadelphia, PA, for the Scientific Reasoning/Inquiry Based Education (SCRIBE) initiative.	100,000	Specter
Plymouth State University, Plymouth, NH, for a collaborative research institute for sustainable rural economics.	250,000	Gregg
Portland State University, Portland, OR, to equip its Science Research and Teaching Center.	400,000	Wyden, Smith

Project	Committee recommendation	Requested by
Redlands Community College, El Reno, OK, for nursing programs .....	100,000	Inhofe
Riverside Community College, Riverside, CA, to prepare high schools students to pursue postgraduate courses in health care.	100,000	Boxer
Robert Morris University, Moon Township, PA, for health care professional education programs in the use of electronic health records.	100,000	Specter
Rochester Area Colleges, Rochester, NY, for Excellence in Math and Science ....	600,000	Schumer, Clinton
Rust College, Holly Springs, MS, for acquisition of equipment for the Science and Mathematics Annex.	500,000	Cochran
Ryan Foundation, Wayne, PA, for civic education programs .....	100,000	Specter
Saint Anselm College, Manchester, NH, for a civic education program .....	250,000	Gregg
Salt Lake Community College, Salt Lake City, Utah, to train health care professionals.	500,000	Bennett
Salve Regina University, Newport, RI, for historic preservation education programs including equipment.	1,000,000	Reed, Whitehouse
Security on Campus, Inc., King of Prussia, PA, for campus safety peer education programs.	25,000	Specter
Seminole State College, Seminole, OK, for the Medical Laboratory Technology Program, including technology acquisition.	100,000	Inhofe
Shippensburg University, Shippensburg, PA, for technology upgrades and acquisition.	100,000	Specter, Casey
South Carolina Technical College System, Columbia, SC, to fund apprenticeship pilot programs in economically distressed areas.	200,000	Graham
Southeastern Pennsylvania Consortium for Higher Education, Glenside, PA, for equipment.	500,000	Casey
Southern Utah University, Cedar City, Utah, to enhance academic skills and training of science teachers in southern Utah through mobile classroom.	50,000	Hatch
Southwestern Indian Polytechnic Institute, Albuquerque, NM, to expand a renewable energy training program.	400,000	Bingaman
Southwestern University, Georgetown, TX, for the Center for Hispanic Studies ...	200,000	Hutchison
Spelman College, Atlanta, GA, for programs to recruit and increase graduation rates for African-American females pursuing sciences, mathematics, or dual-engineering degrees.	100,000	Chambliss
Springfield Public Schools Academy of Arts and Academics, Springfield, OR, for classroom equipment and technology.	100,000	Smith, Wyden
Stephen F. Austin State University, Nacogdoches, TX, for outreach and education programs at the Early Childhood Research and Development Center.	200,000	Hutchison
State University of New York at New Paltz, New Paltz, NY, for curriculum development in economic development and governance.	300,000	Schumer, Clinton
Stonehill College, Easton, MA, to procure equipment and develop programs for the Center for Non-Profit Management.	200,000	Kennedy, Kerry
Susquehanna University, Selinsgrove, PA, for laboratory equipment and technology acquisition.	100,000	Specter, Casey
Texas Woman's University, Denton, TX, for the Institute of Health Sciences Dallas Center, for acquisition of technology.	200,000	Hutchison
Thiel College, Greenville, PA, for technology infrastructure upgrades and acquisition.	100,000	Specter
Tougaloo College, Tougaloo, MS, for an international study abroad program .....	200,000	Cochran
Turtle Mountain Community College, Belcourt, ND, to develop a vocational and technical training curriculum.	750,000	Dorgan, Conrad
University of Alaska, Anchorage, AK, for the 49th State Scholars program .....	350,000	Stevens
University of Alaska, Anchorage, AK, for the Alaska Native Students Science and Engineering program.	1,000,000	Stevens
University of Arizona, Tucson, AZ, for the Integrative Medicine in Residency program.	250,000	Harkin
University of Arkansas for Medical Sciences, Little Rock, AR, for equipment and curriculum development for genetic counseling and other health care programs.	400,000	Lincoln, Pryor
University of Central Arkansas, Conway, AR, for information technology .....	400,000	Lincoln, Pryor
University of Dubuque in Dubuque, Iowa for the establishment of a nursing education program.	500,000	Harkin
University of Hawaii at Hilo for an Applied Rural Science program and a Clinical Pharmacy Training Program.	1,000,000	Inouye, Akaka
University of Hawaii School of Law, for a health policy center and cultural education programs.	250,000	Inouye

Project	Committee recommendation	Requested by
University of Idaho, Moscow, ID, for the Gateway to Math Program, for continued outreach to pre-college math students.	200,000	Craig, Crapo
University of Mississippi, Oxford, MS, for program development and curriculum	3,000,000	Lott
University of New Hampshire, Manchester Campus, Manchester, NH, to expand business and high technology academic programs.	400,000	Sununu
University of North Carolina at Wilmington, North Carolina, for nursing programs including military veterans, clinical research and distance learning.	250,000	Dole
University of Northern Iowa, Cedar Falls, IA, for the development of math and science programs.	200,000	Grassley
University of Scranton, Scranton, PA, for equipment acquisition to support nursing and allied health education programs.	100,000	Specter, Casey
University of South Dakota, Vermillion, SD, to establish degrees in public health.	300,000	Johnson
University of Southern Mississippi, Hattiesburg, MS, for curriculum development and acquisition of equipment.	1,000,000	Lott
University of Tennessee, Knoxville, TN, for the Baker Center for Public Policy ....	6,000,000	Byrd, Cochran, Harkin
University of Tulsa, Tulsa, OK, for acquisition of equipment at the Center for Information Security.	100,000	Inhofe
University of Vermont of Burlington, Burlington, VT, to establish advanced practice graduate nursing program in psychiatric-mental health nursing.	300,000	Leahy
University of Vermont of Burlington, Burlington, VT, to establish a child psychiatry fellowship program.	200,000	Leahy
University of Wisconsin Eau Claire, Eau Claire, WI, to provide educational programs in nanotechnology.	200,000	Kohl
University of Wisconsin Platteville, Platteville, WI, to establish an English as a Second Language teacher certification program.	150,000	Kohl
University of Wisconsin Whitewater, Whitewater, WI, to establish a certification program for science teachers.	150,000	Kohl
Urban College of Boston, Boston, MA, to support higher education programs serving low-income and minority students.	750,000	Kennedy, Kerry
Utah Valley State College, Orem, Utah, to expand nursing education, including technology acquisition and curriculum development.	50,000	Hatch
Vermont Technical College, Randolph Center, VT, for equipment for the Fire Science Program.	500,000	Sanders
Villa Julie College, Stevenson, MD, to expand the Nursing Distance Learning Program.	750,000	Mikulski
Virginia Polytechnic Institute and State University, Blacksburg, VA, for equipment.	200,000	Warner, Webb
Washburn University, Topeka, KS, for equipment acquisition to train students in science and health-related fields.	300,000	Brownback
Washington & Jefferson College, Washington, PA, for foreign language programs.	100,000	Specter
Washington State University, Pullman, WA, for mentoring programs women in science programs.	400,000	Murray, Cantwell
Weber State University, Ogden, Utah, to provide mentoring for minority disadvantaged students.	50,000	Hatch
Weber State University, Ogden, Utah, for stipends and tuition assistance for faculty to pursue advanced nursing degree.	500,000	Bennett
West Chester University, West Chester, PA, for technology infrastructure upgrades and acquisition.	100,000	Specter
Western Iowa Tech Community College, Sioux City, IA, for equipment .....	100,000	Harkin, Grassley
Western Kentucky University Research Foundation, Bowling Green, KY, for equipment acquisition for the science, technology and engineering facility.	1,500,000	McConnell
Western Oregon University, Monmouth, OR, for equipping a nursing simulation laboratory.	250,000	Wyden, Smith
Wheaton College, Norton, MA, to procure educational equipment and information technology to support science center expansion.	200,000	Kennedy, Kerry
Wheelock College, Boston, MA, for educational equipment and curriculum development for the K-9 science teachers program.	250,000	Kennedy, Kerry
William Paterson University, Wayne, NJ, for curriculum development and other activities to establish the Center for the Study of Critical Languages.	250,000	Lautenberg
Wisconsin Association of Independent Colleges and Universities, Madison, WI, to continue implementation of administrative support functions for independent colleges and universities.	200,000	Kohl

Project	Committee recommendation	Requested by
York College of Pennsylvania, York, PA, for laboratory equipment and technology upgrades and acquisition.	100,000	Specter, Casey
York College, York, NE, for training of clinical social workers in central and western Nebraska, including curriculum development.	100,000	Hagel, Ben Nelson

### *Minority Science and Engineering Improvement*

The Committee recommends \$8,730,000 for the Minority Science and Engineering Improvement program [MSEIP], the same as the fiscal year 2007 level. Funds are used to provide discretionary grants to institutions with minority enrollments greater than 50 percent to purchase equipment, develop curricula, and support advanced faculty training. Grants are intended to improve science and engineering education programs and increase the number of minority students in the fields of science, mathematics, and engineering.

### *Tribally Controlled Postsecondary Career and Technical Institutions*

The Committee recommends \$8,000,000 for tribally controlled postsecondary vocational institutions, an increase of \$634,000 over the fiscal year 2007 level. This program provides grants for the operation and improvement of two tribally controlled postsecondary vocational institutions to ensure continued and expanding opportunities for Indian students.

### *Federal TRIO Programs*

The Committee recommends \$858,178,000 for Federal TRIO Programs, an increase of \$30,000,000 over the fiscal year 2007 level.

TRIO programs provide a variety of services to improve postsecondary education opportunities for low-income individuals and first-generation college students: Upward Bound offers disadvantaged high school students academic services to develop the skills and motivation needed to continue their education; Student Support Services provides remedial instruction, counseling, summer programs and grant aid to disadvantaged college students to help them complete their postsecondary education; Talent Search identifies and counsels individuals between ages 11 and 27 regarding opportunities for completing high school and enrolling in postsecondary education; Educational Opportunity Centers provide information and counseling on available financial and academic assistance to low-income adults who are first-generation college students; and the Ronald E. McNair Postbaccalaureate Achievement Program supports research internships, seminars, tutoring, and other activities to encourage disadvantaged college students to enroll in graduate programs.

### *Gaining Early Awareness and Readiness for Undergraduate Programs [GEARUP]*

The Committee recommends \$313,423,000 for GEARUP, an increase of \$10,000,000 over the fiscal year 2007 level.

Under this program funds are used by States and partnerships of colleges, middle and high schools, and community organizations

to assist middle and high schools serving a high percentage of low-income students. Services provided help students prepare for and pursue a postsecondary education.

#### *Byrd Honors Scholarships*

The Committee recommends \$41,000,000 for the Byrd honors scholarship program, an increase of \$410,000 over the fiscal year 2007 level.

The Byrd honors scholarship program is designed to promote student excellence and achievement and to recognize exceptionally able students who show promise of continued excellence. Funds are allocated to State education agencies based on each State's school-aged population. The State education agencies select the recipients of the scholarships in consultation with school administrators, teachers, counselors, and parents. The funds provided will support a new cohort of first-year students in 2008, and continue support for the 2005, 2006, and 2007 cohorts of students in their fourth, third and second years of study, respectively.

#### *Javits Fellowships*

The Committee recommends \$9,699,000 for the Javits Fellowship program, the same as the fiscal year 2007 level.

The Javits Fellowships program provides fellowships of up to 4 years to students of superior ability who are pursuing doctoral degrees in the arts, humanities, and social sciences at any institution of their choice. Each fellowship consists of a student stipend to cover living costs, and an institutional payment to cover each fellow's tuition and other expenses. The Committee bill includes language proposed in the budget that stipulates that funds provided in the fiscal year 2008 appropriation support fellowships for the 2009–2010 academic year.

#### *Graduate Assistance in Areas of National Need [GAANN]*

The Committee recommends \$30,067,000 for graduate assistance in areas of national need, the same as the fiscal year 2007 level. This program awards competitive grants to graduate academic departments and programs for fellowship support in areas of national need as determined by the Secretary. In fiscal year 2005, the Secretary designated the following areas of national need: biology, chemistry, computer and information sciences, engineering, geological and related sciences, mathematics, physics, and nursing. Recipients must demonstrate financial need and academic excellence, and seek the highest degree in their fields.

The Committee is especially pleased that the Secretary included nursing as an area of national need in its fiscal year 2006 program announcement. Given the magnitude of the nursing shortage, the Committee was pleased to see the Secretary take this step in establishing a priority for a nursing program that focuses on the preparation of nurse scholars at the Ph.D. level for educational leadership roles.

The Committee believes that the GAANN program can make a difference in helping our Nation prepare for the projected need for 1.2 million new and replacement nurses by 2014 as identified by the U.S. Bureau of Labor Statistics. The Committee encourages the

Secretary to include nursing as an area of national need in future years until our Nation develops an adequate supply of nurses and ends this projected shortage.

#### *Teacher Quality Enhancement Grants*

The Committee recommends \$28,521,000 for the teacher quality enhancement grants program. This amount is \$31,374,000 below the fiscal year 2007 level and a sufficient amount to fund all fiscal year 2008 continuation awards.

The program was established to support initiatives that best meet specific teacher preparation and recruitment needs. Further, the Higher Education Act provides and designates funding for the program in three focus areas: 45 percent of resources support a State grant program, 45 percent of funds are used for a partnership program, and 10 percent are designated for a recruitment grant program.

The Committee bill includes language that would allow the Department to fund awards under the three program areas at the discretion of the Department, instead of as mandated by the Higher Education Act. The Committee continues this language from last year's bill in order to prevent funds available under this program from going unused.

Under the State grant program, funds may be used for a variety of State-level reforms, including more rigorous teacher certification and licensure requirements; provision of high-quality alternative routes to certification; development of systems to reward high-performing teachers and principals; and development of efforts to reduce the shortage of qualified teachers in high-poverty areas.

Teacher training partnership grants, which are awarded to local partnerships comprised of at least one school of arts and science, one school or program of education, a local education agency, and a K-12 school, may be used for a variety of activities designed to improve teacher preparation and performance, including efforts to provide increased academic study in a proposed teaching specialty area; to prepare teachers to use technology effectively in the classroom; to provide preservice clinical experiences; and to integrate reliable research-based teaching methods into the curriculum. Partnerships may work with other entities, with those involving businesses receiving priority consideration. Partnerships are eligible to receive a one-time-only grant to encourage reform and improvement at the local level.

The recruitment grant program supports efforts to reduce shortages of qualified teachers in high-need school districts as well as provide assistance for high-quality teacher preparation and induction programs to meet the specific educational needs of the local area.

#### *Child Care Access Means Parents in Schools*

The Committee recommends an appropriation of \$15,810,000 for the Child Care Access Means Parents in School [CCAMPIS] program, the same as the fiscal year 2007 level. CCAMPIS was established in the Higher Education Amendments of 1998 to support the efforts of a growing number of non-traditional students who are struggling to complete their college degrees at the same time that

they take care of their children. Discretionary grants of up to 4 years are made to institutions of higher education to support or establish a campus-based childcare program primarily serving the needs of low-income students enrolled at the institution.

*Advancing America through Foreign Language Partnerships*

The Committee recommendation includes \$12,000,000 for this new program. The administration had requested \$24,000,000. This program funds grants to increase the number of Americans with professional levels of competency in languages critical to national security. Under this new program grants would be awarded to institutions of higher education for partnerships with school districts to create programs of study in kindergarten through postsecondary education in critical needs languages.

*Demonstration Projects to Ensure Quality Higher Education for Students With Disabilities*

The Committee recommends \$6,875,000 for this program, the same amount as the comparable fiscal year 2007 funding level. The budget proposes no funding for this program. This program's purpose is to ensure that students with disabilities receive a high-quality postsecondary education. Grants are made to support model demonstration projects that provide technical assistance and professional development activities for faculty and administrators in institutions of higher education.

The Committee urges the Department to utilize resources available under the GPRA/data collection program to support a rigorous evaluation of outcomes achieved by grantees funded under this program and to identify the impact that these funds are having on improving opportunities for students with disabilities at institutions of higher education throughout the United States.

*Underground Railroad Program*

The Committee recommendation does not include funding for the Underground Railroad program and the budget request does not include any funds for this activity. The comparable fiscal year 2007 funding level was \$1,980,000. The program was authorized by the Higher Education Amendments of 1998 and was funded for the first time in fiscal year 1999. Grants are provided to research, display, interpret, and collect artifacts relating to the history of the underground railroad. Educational organizations receiving funds must demonstrate substantial private support through a public-private partnership, create an endowment fund that provides for ongoing operation of the facility, and establish a network of satellite centers throughout the United States to share information and teach people about the significance of the Underground Railroad in American history.

*GPRA/Higher Education Act Program Evaluation*

The Committee recommends \$970,000 for data collection associated with the Government Performance and Results Act data collection and to evaluate programs authorized by the Higher Education Act. These funds are used to comply with the Government Performance and Results Act, which requires the collection of data

and evaluation of Higher Education programs and the performance of recipients of Higher Education funds.

*B.J. Stupak Olympic Scholarships*

The Committee recommendation does not include funding for this program. The comparable fiscal year 2007 funding level is \$970,000 and the budget request did not include funds for this activity.

*Thurgood Marshall Legal Educational Opportunity Program*

The Committee recommendation does not include any funds for the Thurgood Marshall Legal Educational Opportunity Program. The comparable funding level for fiscal year 2007 is \$2,946,000 and the budget request does not include any funds for this purpose.

Under this program, funds help low-income, minority or disadvantaged college students with the information, preparation and financial assistance to enter and complete law school study. The Higher Education Act stipulates that the Secretary make an award to or contract with the Council on Legal Education Opportunity to carry out authorized activities.

HOWARD UNIVERSITY

Appropriations, 2007 .....	\$237,391,000
Budget estimate, 2008 .....	233,866,000
Committee recommendation .....	237,392,000

The Committee recommends an appropriation of \$237,392,000 for Howard University. The comparable fiscal year 2007 funding level is \$237,391,000 and the budget request includes \$233,866,000 for this purpose. Howard University is located in the District of Columbia and offers undergraduate, graduate, and professional degrees through 12 schools and colleges. The university also administers the Howard University Hospital, which provides both inpatient and outpatient care, as well as training in the health professions. Federal funds from this account support more than 50 percent of the university's projected educational and general expenditures, excluding the hospital. The Committee recommends, within the funds provided, not less than \$3,526,000 shall be for the endowment program.

*Howard University Hospital.*—Within the funds provided, the Committee recommends \$29,461,000 for the Howard University Hospital. The comparable fiscal year 2007 funding level and the budget request both are \$29,461,000 for this purpose. The hospital serves as a major acute and ambulatory care center for the District of Columbia and functions as a major teaching facility attached to the university. The Federal appropriation provides partial funding for the hospital's operations.

COLLEGE HOUSING AND ACADEMIC FACILITIES LOANS

Appropriations, 2007 .....	\$571,000
Budget estimate, 2008 .....	481,000
Committee recommendation .....	481,000

*Federal Administration.*—The Committee bill includes \$481,000 for Federal administration of the CHAFL program. The comparable

fiscal year 2007 funding level is \$571,000 and the budget request includes \$481,000 for such expenses.

These funds will be used to reimburse the Department for expenses incurred in managing the existing CHAFL loan portfolio during fiscal year 2008. These expenses include salaries and benefits, travel, printing, contracts (including contracted loan servicing activities), and other expenses directly related to the administration of the CHAFL program.

HISTORICALLY BLACK COLLEGE AND UNIVERSITY CAPITAL FINANCING PROGRAM

Appropriations, 2007 .....	\$209,000
Budget estimate, 2008 .....	188,000
Committee recommendation .....	188,000

*Federal Administration.*—The Committee recommends \$188,000 for Federal administration of the Historically Black College and University [HBCU] Capital Financing Program. The comparable fiscal year 2007 funding level is \$209,000 and the budget request includes \$188,000 for this activity.

The HBCU Capital Financing Program makes capital available to HBCUs for construction, renovation, and repair of academic facilities by providing a Federal guarantee for private sector construction bonds. Construction loans will be made from the proceeds of the sale of the bonds.

INSTITUTE OF EDUCATION SCIENCE

Appropriations, 2007 .....	\$517,485,000
Budget estimate, 2008 .....	594,262,000
Committee recommendation .....	589,826,000

The Committee recommends \$589,826,000 for the Institute of Education Sciences. The comparable fiscal year 2007 funding level is \$517,485,000 and the budget request includes \$594,262,000 for authorized activities. This account supports education research, data collection and analysis activities, and the assessment of student progress.

RESEARCH, DEVELOPMENT AND DISSEMINATION

The Committee recommends \$182,552,000 for education research, development and national dissemination activities. The comparable fiscal year 2007 amount is \$162,552,000 and the budget request includes \$162,535,000 for these activities. Funds are available for obligation for 2 fiscal years. These funds support research, development, and dissemination activities that are aimed at expanding fundamental knowledge of education and promoting the use of research and development findings in the design of efforts to improve education.

The Committee recommendation includes an increase of \$20,000,000 over the budget request to accelerate research and development of programs that can help States and local school districts meet the goals of No Child Left Behind [NCLB]. The Committee notes that one of the bipartisan recommendations of The Commission on No Child Left Behind is to double the research budget at IES and target the increase to research that assists

schools in meeting the goals of NCLB. The Committee intends for these funds to be used in conjunction with IES base funding to develop and evaluate approaches to improving student achievement, such as supplemental education services and turnaround programs, particularly for schools failing to meet adequate yearly progress. The Committee believes that these funds should be used for activities such as, funding large-scale randomized evaluations of programs that appear to be particularly promising through small-scale evaluations; funding non-profit developers of proven programs to help them create capacity for training, materials production, and other activities that would enable these programs to be utilized more widely; and fund researchers to carry out large-scale, randomized evaluations of existing programs.

The Committee strongly supports the Department's efforts to carry out congressionally authorized evaluations of Federal education programs using rigorous methodologies, particularly random assignment, that are capable of producing scientifically valid knowledge regarding which program activities are effective. To ensure that authorized evaluations are conducted in a rigorous manner that is independent of the program office and includes scientific peer review, the Committee believes that the Institute of Education Sciences should be the lead agency for the design and implementation of these evaluations. The Committee believes further that it is essential for program offices to work collaboratively with the Institute to include a priority or requirement in program solicitations for grantee participation in such evaluations, including random assignment, to the extent the Institute deems appropriate and where not specifically prohibited by law. The Committee notes that program offices and the Institute have already collaborated in this manner to advance rigorous evaluations in programs such as Student Drug Testing, Smaller Learning Communities, Student Mentoring, and Striving Readers.

The Committee is pleased with the framework identified by the Institute in June 2, 2006 correspondence from the Director that outlines concrete steps the Institute is taking to implement the national research and development centers program, consistent with the intent of the Committee. The Committee intends for fiscal year 2007 and 2008 funds available to the Institute to be utilized in the same manner.

The Committee is encouraged by the Institute's continued commitment to increasing the scientific quality of its research projects that translate basic cognitive, developmental and neuroscience research findings from into effective classroom practices. The Committee supports the Institute's focus on math and science cognition research that is necessary for the nation's competitiveness. To maximize research investments, the Committee encourages IES to increase its communication and coordination of research agendas with the National Institute of Child Health and Human Development to increase academic achievement for all students, including those with learning disabilities.

The Committee continues to support the fully integrated use of technology in schools and urges the Department to continue evaluating the use of educational technology and its impact on achievement over the long term. In particular, the Committee supports the

contract recently awarded by the Department to the RAND Corporation for a study of the impact of Carnegie Learning's Cognitive Tutor Algebra I Curriculum. The Department should be prepared to comment on the progress of this study during the fiscal year 2009 budget hearing.

#### STATISTICS

The Committee recommends \$95,022,000 for data gathering and statistical analysis activities of the National Center for Education Statistics [NCES]. The comparable fiscal year 2007 funding level is \$90,022,000 and the budget request includes \$119,022,000 for this purpose.

The NCES collects, analyzes, and reports statistics on education in the United States. Activities are carried out directly and through grants and contracts. The Center collects data on educational institutions at all levels, longitudinal data on student progress, and data relevant to public policy. The NCES also provides technical assistance to State and local education agencies and postsecondary institutions.

The Committee has included funds above the fiscal year 2007 level under the arts in education evaluation activity and within this program for the National Center for Education Statistics to utilize its Fast Response Survey System to collect data for the report of Arts Education in Public Elementary and Secondary Schools during the 2008–2009 school year. The Committee expects this survey to be co-requested by the Office of Innovation and Improvement and the National Endowment for the Arts, and administered by the Institute for Education Sciences. The Committee believes the survey must have the comprehensive quality of the 2002 report and should include national samples of elementary and secondary school principals, as well as surveys of elementary and secondary classroom teachers and arts specialists.

#### REGIONAL EDUCATIONAL LABORATORIES

The Committee recommends \$68,000,000 to continue support for the regional educational laboratories. The comparable fiscal year 2007 funding level is \$65,470,000 and the budget request includes \$65,464,000 for this purpose. Program funds support a network of 10 laboratories that are responsible for promoting the use of broad-based systemic strategies to improve student achievement. The Committee recommends additional funds for the laboratories to increase their capacity to provide timely responses to requests for assistance on issues of urgent regional need.

The Committee is pleased that the research, development, dissemination, and technical assistance activities carried out by the regional educational laboratories will be consistent with the standards for scientifically based research prescribed in the Education Sciences Reform Act of 2002. The Committee believes that the laboratories, working collaboratively with the comprehensive centers and Department-supported technical assistance providers, have an important role to play in helping parents, States, and school districts improve student achievement as called for in No Child Left Behind. In particular, the Committee intends for the laboratories and their technical assistance provider partners to provide products

and services that will help States and school districts utilize the school improvement funds available in the Education for the Disadvantaged account to support school improvement activities that are supported by scientifically based research.

#### RESEARCH AND INNOVATION IN SPECIAL EDUCATION

The Committee recommends \$71,840,000 for research and innovation in special education. The comparable funding level for fiscal year 2007 is \$71,840,000 and the budget request includes \$71,829,000 for this purpose. The National Center for Special Education Research addresses gaps in scientific knowledge in order to improve special education and early intervention services and outcomes for infants, toddlers, and children with disabilities. Funds provided to the center are available for obligation for 2 fiscal years.

#### SPECIAL EDUCATION STUDIES AND EVALUATIONS

The Committee recommends \$9,628,000 for special education studies and evaluations. The comparable funding level for fiscal year 2007 is \$9,900,000 and the budget request includes \$9,628,000 for this purpose.

This program supports competitive grants, contracts, and cooperative agreements to assess the implementation of the Individuals with Disabilities Education Act. Funds also will be used to evaluate the effectiveness of State and local efforts to deliver special education services and early intervention programs. Funds are available for obligation for 2 fiscal years.

#### STATEWIDE DATA SYSTEMS

The Committee recommendation includes \$58,000,000 for statewide data systems. The comparable funding level for fiscal year 2007 is \$24,552,000 and the budget request includes \$49,152,000 for this purpose.

This program supports competitive grants to State educational agencies to enable such agencies to design, develop, and implement statewide, longitudinal data systems to manage, analyze, disaggregate, and use individual student data. Funds are available for obligation for 2 fiscal years. The Committee believes these funds are necessary to help States measure individual student performance, particularly as it relates to adequate yearly progress goals, more efficiently and accurately.

The Committee commends the Institute for its work in establishing an expert team to design the program and plan the 2005 grant competition. These actions are the first steps toward fulfilling the goals established in the Educational Technical Assistance Act and the statement of the managers accompanying the fiscal year 2005 Department of Education appropriations act. The Committee supports the progress of the Institute of Education Sciences in implementing the Statewide Longitudinal Data Systems program through the 14 grant awards made to States to date. The goals of these grants are to enhance the ability of States to use education data from individual student records to make data-driven decisions to improve student learning, to facilitate research to increase student achievement and close achievement gaps, and to comply with

requirements under the Elementary and Secondary Education Act of 1965 and other reporting requirements. The Committee intends for the Institute to continue to administer this program in a manner that addresses all of these goals.

ASSESSMENT

The Committee recommends \$104,784,000 for assessment. The comparable fiscal year 2007 funding level is \$93,149,000 and the budget request includes \$116,632,000 for authorized activities.

These funds provide support for the National Assessment of Educational Progress [NAEP], a congressionally mandated assessment created to measure the educational achievement of American students. The primary goal of NAEP is to determine and report the status and trends over time in educational achievement, subject by subject. Beginning in 2002, the Department began paying for State participation in biennial reading and mathematics assessments in grades 4 and 8.

The budget request includes an increase of \$22,500,000 to support activities for implementing in 2009 State-level assessments in the 12th grade. The Committee recommendation includes a portion of the requested funds.

Within the funds appropriated, the Committee recommends \$6,037,000 for the National Assessment Governing Board [NAGB], which is responsible for formulating policy for NAEP. The comparable fiscal year 2007 amount is \$5,054,000 and the budget request includes \$6,037,000 for NAGB.

DEPARTMENTAL MANAGEMENT

PROGRAM ADMINISTRATION

Appropriations, 2007 .....	\$418,587,000
Budget estimate, 2008 .....	446,934,000
Committee recommendation .....	432,631,000

The Committee recommends \$432,631,000 for program administration. The comparable fiscal year 2007 funding level is \$418,587,000 and the budget request includes \$446,934,000 for this purpose.

Funds support personnel compensation and benefits, travel, rent, communications, utilities, printing, equipment and supplies, automated data processing, and other services required to award, administer, and monitor approximately 180 Federal education programs. Support for program evaluation and studies and advisory councils is also provided under this activity.

The budget request includes \$17,303,000 for building renovations and related expenses associated with the upgrade of the Mary E. Switzer building. The Committee recommendation includes \$3,000,000 for this purpose and makes the funds available until expended, as proposed in the budget request.

The Committee is aware that several leading professional societies and lay organizations have recognized the importance of managing life-threatening food allergies in the school setting. It is estimated that 94 percent of the Nation's schools have students with food allergy, and the incidence is increasing. The Committee encourages the Department to work with the Department of Health

and Human Services and knowledgeable private sector organizations on the development of guidelines for the management of children with food allergy as well as a plan to disseminate these guidelines to State and local educational agencies.

The rapid pace of technological change and increasing global competition constantly challenge our schools to innovate and to improve training in math, science and engineering. As a result, a number of promising initiatives are underway to improve the math and science skills of middle-school students and to attract students, especially young women and minorities, into careers in engineering. Some national multimedia initiatives, for example, combine innovative television programming with specialized lesson plans and web-based materials. These multi-faceted approaches complement our national goals to improve academic achievement and remain competitive in the global marketplace. The Committee encourages the Secretary to consider incorporating promising initiatives into the Department's long-term strategy to improve achievement in math, science and engineering, particularly among women and minorities.

#### OFFICE FOR CIVIL RIGHTS

Appropriations, 2007 .....	\$91,205,000
Budget estimate, 2008 .....	93,771,000
Committee recommendation .....	93,771,000

The Committee recommends \$93,771,000 for the Office for Civil Rights [OCR]. The comparable fiscal year 2007 amount is \$91,205,000 and the budget request includes \$93,771,000 for this purpose.

The Office for Civil Rights is responsible for the enforcement of laws that prohibit discrimination on the basis of race, color, national origin, sex, disability, and age in all programs and institutions funded by the Department of Education. To carry out this responsibility, OCR investigates and resolves discrimination complaints, monitors desegregation and equal educational opportunity plans, reviews possible discriminatory practices by recipients of Federal education funds, and provides technical assistance to recipients of funds to help them meet civil rights requirements.

In the Senate report (109–103) for fiscal year 2006, the Committee expressed concern over the Department's "Additional Clarification of Intercollegiate Athletics Policy: Three-Part Test—Part Three" issued in March 2005 and asked the Department to prepare a report addressing the other sources of information besides surveys institutions consider to assess student interest under the third prong of the three-part test. The Committee is aware that the Secretary has reassured the Congress through several exchanges of correspondence, and in its report, that the Additional Clarification does not establish any new legal standards, but rather is intended to provide institutions with additional guidance on compliance with the third part of the three-part test. Accordingly, the Committee understands that the 2005 Additional Clarification does not change the legal standards for compliance with prong three set forth in the 1996 Policy Clarification, and that a presumption of compliance with prong three may not be achieved solely through reliance on a survey. Rather, the Additional Clarification is intended to provide

recipients with a model survey that they may use as one tool in the process of evaluating their compliance with prong three and any such survey may only be used in conjunction with the other methods for assessing interest that the 1996 Clarification requires recipients to evaluate (such as interviews with students and coaches and participation rates in area high school, club, intramural and community sports).

The Committee also understands that any nonresponse to the Model Survey will be considered a nonresponse, rather than an expression of lack of interest. To eliminate confusion regarding the use of interest surveys to demonstrate compliance with prong three, the Committee directs the Department to provide public notice of the understanding of the Additional Clarification expressed in the preceding sentences to all entities covered under title IX, including by posting such notice on the Department's homepage, and by including such notice immediately after the title of each printed or electronic version of the Additional Clarification. The Committee requests that the Department take this action no later than 60 days after enactment of this act.

OFFICE OF THE INSPECTOR GENERAL

Appropriations, 2007 .....	\$50,266,000
Budget estimate, 2008 .....	53,239,000
Committee recommendation .....	54,239,000

The Committee recommends \$54,239,000 for the Office of the Inspector General. The comparable fiscal year 2007 amount is \$50,266,000 and the budget request includes \$53,239,000 for authorized activities.

The Office of the Inspector General has the authority to investigate all departmental programs and administrative activities, including those under contract or grant, to prevent and detect fraud and abuse, and to ensure the quality and integrity of those programs. The Office investigates alleged misuse of Federal funds, and conducts audits to determine compliance with laws and regulations, efficiency of operations, and effectiveness in achieving program goals.

GENERAL PROVISIONS

The Committee bill contains language which has been included in the bill since 1974, prohibiting the use of funds for the transportation of students or teachers in order to overcome racial imbalance (sec. 301).

The Committee bill contains language included in the bill since 1977, prohibiting the involuntary transportation of students other than to the school nearest to the student's home (sec. 302).

The Committee bill contains language which has been included in the bill since 1980, prohibiting the use of funds to prevent the implementation of programs of voluntary prayer and meditation in public schools (sec. 303).

The Committee bill includes a provision giving the Secretary of Education authority to transfer up to 1 percent of any discretionary funds between appropriations (sec. 304).

The Committee bill includes a new provision that prohibits funds from this act to be used to promulgate, implement, or enforce any revision to the regulations in effect under section 496 of the Higher Education Act of 1965 on June 1, 2007, until legislation specifically requiring such revision is enacted, (sec. 305).

The Committee bill includes a provision related to eligibility of and computation of payments for certain school districts under the Impact Aid program (sec. 306) (Funding for this program was requested by Senator Durbin).

TITLE IV  
RELATED AGENCIES

COMMITTEE FOR PURCHASE FROM PEOPLE WHO ARE BLIND OR  
SEVERELY DISABLED

Appropriations, 2007 .....	\$4,652,000
Budget estimate, 2008 .....	4,994,000
Committee recommendation .....	4,994,000

The Committee recommends \$4,994,000 for fiscal year 2008 for the Committee for Purchase From People Who Are Blind or Severely Disabled.

The Committee for Purchase From People Who Are Blind or Severely Disabled was established by the Javits-Wagner-O'Day Act of 1938 as amended. Its primary objective is to increase the employment opportunities for people who are blind or have other severe disabilities and, whenever possible, to prepare them to engage in competitive employment.

CORPORATION FOR NATIONAL AND COMMUNITY SERVICE

Appropriations, 2007 .....	\$884,547,000
Budget estimate, 2008 .....	828,680,000
Committee recommendation .....	880,909,000

The Committee recommends \$880,909,000 for the Corporation for National and Community Service in fiscal year 2008.

The Corporation for National and Community Service, a Corporation owned by the Federal Government, was established by the National and Community Service Trust Act of 1993 (Public Law 103-982) to enhance opportunities for national and community service and provide national service education awards. The Corporation makes grants to States, institutions of higher education, public and private nonprofit organizations, and others to create service opportunities for students, out-of-school youth, and adults.

DOMESTIC VOLUNTEER SERVICE PROGRAMS

The Committee recommends \$313,054,000 for fiscal year 2008 for the domestic volunteer service programs of the Corporation for National and Community Service. The comparable level for fiscal year 2007 is \$316,554,000 and \$294,226,000 is the administration request for fiscal year 2008. Programs authorized under the Domestic Volunteer Service Act include: the Volunteers in Service to America Program [VISTA]; the Foster Grandparent Program; the Senior Companion Program; and the Retired and Senior Volunteer Program.

### VISTA

The Committee recommends \$95,468,000 for the Volunteers in Service to America [VISTA] Program. This amount is equal to the comparable funding level for fiscal year 2007. The budget request for fiscal year 2008 is \$89,734,000.

VISTA, created in 1964 under the Economic Opportunity Act, provides capacity building for small community-based organizations. VISTA volunteers raise resources for local projects, recruit and organize volunteers, and establish and expand local community-based programs in housing, employment, health, and economic development activities.

### *National Senior Volunteer Corps*

The Committee recommends \$217,586,000 for the National Senior Volunteer Corps programs, compared to \$217,586,000 in fiscal year 2007 and \$204,492,000 in the fiscal year 2008 budget request.

In accordance with the Domestic Volunteer Service Act [DVSA], the Committee intends that at least one-third of each program's increase over the fiscal year 2007 level shall be used to fund Programs of National Significance [PNS] expansion grants to allow existing FGP, RSVP, and SCP programs to expand the number of volunteers serving in areas of critical need as identified by Congress in the DVSA. All remaining funds shall be used to fund an administrative cost increase for each existing program nationwide. The amount to be allocated to individual grantees shall be calculated based on a percentage of the entire Federal grant award in fiscal year 2007, including the amount specified for payment of non-taxable stipends. The Committee directs that the Corporation shall comply with the directive that use of PNS funding increases in the FGP, RSVP, SCP, and VISTA shall not be restricted to any particular activity. The Committee further directs that the Corporation shall not stipulate a minimum or maximum for PNS grant augmentation.

The maximum total dollars which may be used in fiscal year 2008 for Grants.gov/eGrants support, Training and Technical Assistance, and Recruitment and Retention activities shall not exceed the amount enacted for these activities in fiscal year 2007.

Further, funds appropriated for fiscal year 2008 may not be used to implement or support service collaboration agreements or any other changes in the administration and/or governance of national service programs prior to passage of a bill by the authorizing committee of jurisdiction specifying such changes.

The CNCS shall comply with the directive that use of funds appropriated for FGP, RSVP, SCP, and VISTA shall not be used to fund demonstration activities. The Committee has not included funding for senior demonstration activities.

### *Foster Grandparent Program*

The Committee recommends \$110,937,000 for fiscal year 2008 for the Foster Grandparent Program, which is equal to the comparable funding level for fiscal year 2007. The budget request for fiscal year 2008 was \$97,550,000. This program provides volunteer opportunities to low-income seniors age 60 and over who serve at-risk youth.

This program not only involves seniors in their communities, but also provides a host of services to children.

*Senior Companion Program*

The Committee recommends \$46,964,000 for fiscal year 2008 for the Senior Companion Program. This amount is the same as the comparable funding level for fiscal year 2007. The budget request for fiscal year 2008 was \$41,299,000.

This program enables senior citizens to provide personal assistance and companionship to adults with physical, mental, or emotional difficulties. Senior companions provide vital in-home services to elderly Americans who would otherwise have to enter nursing homes. The volunteers also provide respite care to relieve care givers.

*Retired and Senior Volunteer Program*

The Committee recommends \$59,685,000 for the Retired and Senior Volunteer Program. The comparable level for fiscal year 2007 is \$59,685,000 and the administration request for fiscal year 2008 is 65,643,000.

This program involves persons age 55 and over in volunteer opportunities in their communities such as tutoring youth, responding to natural disasters, teaching parenting skills to teen parents, and mentoring troubled youth. Funding was not included for a baby boomer initiative that would compete and be administered separately from the current program.

NATIONAL AND COMMUNITY SERVICE PROGRAMS

(INCLUDING TRANSFER OF FUNDS)

The Committee recommends \$491,435,000 for the programs authorized under the National Community Service Act of 1990. The comparable level for fiscal year 2007 is \$494,066,000 and the administration request for fiscal year 2008 is \$459,422,000.

The National and Community Service Programs of the Corporation for National and Community Service include: the AmeriCorps program (including AmeriCorps State and National and the National Civilian Community Corps); Learn and Serve America, Innovation, Demonstration, Assistance and Evaluation activities; State Commission Administration grants; and the National Service Trust.

The Committee recommendation includes \$288,291,000 for AmeriCorps State and National operating grants (including \$12,516,000 for State administrative expenses); \$117,720,000 for the National Service Trust; \$10,550,000 for subtitle H fund activities; \$31,789,000 for AmeriCorps NCCC; \$39,125,000 for Learn and Serve; and \$3,960,000 for audits and evaluations.

The Committee has deleted long-standing statutory language urging the Corporation to reduce the cost-per-member of service. The Committee appreciates the Corporation's attempt to drive down costs, however, the Committee believes that there is much merit to the variety of volunteer opportunities that the Corporation offers. In particular, the Committee strongly supports full-time and residential service models which cost the Government more per

unit but also provide a strong branding effort for AmeriCorps. Part-time service and education award-only models are an important component of AmeriCorps but should not become the sole means of service.

In addition, the Committee was disappointed to note inconsistencies in the calculation of cost-per-member in the Corporation's 2008 budget justification with respect to the education award. Those inconsistencies unfairly disadvantaged residential service programs and were used to justify cuts to the National Civilian Community Corps. The Committee expects future calculations of cost-per-member to treat the education award equally across all programs.

*AmeriCorps Grants Program (not including NCCC)*

Within the amount provided for AmeriCorps grants, the Committee is providing \$65,000,000 for national direct grantees.

The Committee is concerned that national direct funding is awarded in a way that disadvantages rural areas of this country. The Committee urges the Corporation to put a priority on national direct applications that serve rural areas and report to the Committee within 30 days after the end of the fiscal year on the proportion of awards given to rural and urban serving areas.

The Committee requests that the Corporation provide annual reports to the Committee on Appropriations and the Corporation's Inspector General on the actual and projected year-end level of AmeriCorps membership enrollment, usage, and earnings, and the financial status of the Trust fund (revenue, expenses, outstanding liabilities, reserve, etc.).

The Committee recognizes that, even with recent improvements, a small lapse is to be expected in AmeriCorps grants due to member turnover. Therefore, the Committee has included bill language allowing the Corporation to transfer any funds deobligated from closed out AmeriCorps grants to the National Service Trust, offsetting the need for new budget authority in that account in the future. The Committee expects the Corporation to track re-fill rates and include that information in the annual budget justification.

The Committee requests a report from AmeriCorps that provides candidate selection and non-selection statistics for each of their three programs (AmeriCorps State and National, AmeriCorps VISTA and AmeriCorps NCCC) based on the following demographics: ethnicity, gender and educational preparation.

*Innovation, Assistance and Other Activities*

Within the amount recommended for innovation, demonstration, and assistance activities, the Committee recommendation includes no funding for Presidentially requested earmarks such as Points of Light Foundation or America's Promise. The Committee has increased the cap on the national direct competition funding to encourage these and other previously earmarked entities to compete for the funding.

The Committee has not provided any funding in this account for Teach for America; these funds were requested by the administration within the Department of Education.

The Committee expects a spending plan for innovation activities 60 days after enactment of this act.

*AmeriCorps National Civilian Community Corps*

The Committee is deeply disappointed that the Corporation has moved forward with a consolidation of the National Civilian Community Corps [NCCC] despite clear guidance to the contrary from this Committee in the last 3 years of appropriations bills and reports. The Committee has included funding and statutory direction to restore the two centers closed by the Corporation in sites identified and evaluated by the Corporation in its geographic assessment in 2005 and its more specific site evaluation in October 2006. The Committee expects a class to be operating out of each facility by the end of fiscal year 2008.

SALARIES AND EXPENSES

The Committee recommends an appropriation of \$69,520,000 for the Corporation's salaries and expenses. The comparable level for fiscal year 2007 was \$68,964,000 and the administration request for fiscal year 2008 was \$69,520,000. The Committee reiterates the directive under the program account that the Corporation must fund all staffing needs from the salaries and expenses account.

The salaries and expenses appropriation provides funds for staff salaries, benefits, travel, training, rent, advisory and assistance services, communications and utilities expenses, supplies, equipment, and other operating expenses necessary for management of the Corporation's activities under the National and Community Service Act of 1990 and the Domestic Volunteer Service Act of 1973.

OFFICE OF INSPECTOR GENERAL

The Committee recommends an appropriation of \$6,900,000 for the Office of Inspector General [OIG]. The comparable level for fiscal year 2007 was \$4,963,000 and the administration request for fiscal year 2008 was \$5,512,000.

The goals of the Office of Inspector General are to increase organizational efficiency and effectiveness and to prevent fraud, waste, and abuse. The Office of Inspector General within the Corporation for National and Community Service was transferred to the Corporation from the former ACTION agency when ACTION was abolished and merged into the Corporation in April 1994.

The Committee continues to direct the OIG to review the Corporation's management of the National Service Trust fund. The Committee directs the OIG to continue reviewing the annual Trust reports and to notify the Committees on Appropriations on the accuracy of the reports.

ADMINISTRATIVE PROVISIONS

The Committee has included five administrative provisions carried in prior year appropriations acts as follows: language regarding: qualified student loans eligible for education awards; the availability of funds for the placement of volunteers with disabilities; the Inspector General to levy sanctions in accordance with stand-

ard Inspector General audit resolutions procedures; language regarding the Corporation to make significant changes to program requirements or policy through public rulemaking and public notice and grant selection process; and language limiting the Corporation's authority to transfer funds between programs.

CORPORATION FOR PUBLIC BROADCASTING

Appropriations, 2008 .....	\$400,000,000
Appropriations, 2009 .....	400,000,000
Budget estimate, 2010 .....	
Committee recommendation .....	420,000,000

The Committee recommends \$420,000,000 be made available for the Corporation for Public Broadcasting [CPB], as an advance appropriation for fiscal year 2010. The comparable funding level provided last year was \$400,000,000 for fiscal year 2009. The budget request does not include advance funds for this program.

In addition, the Committee recommends \$29,700,000 be made available in fiscal year 2008 for the conversion to digital broadcasting, the same as the comparable funding level for fiscal year 2007. The budget request included authority to permit CPB to spend up to \$30,600,000 in previously appropriated fiscal year 2008 funds for digital conversion activities.

The Committee has strongly supported the conversion of public broadcasting stations to digital formats and continues to do so in this act. However, the Committee recognizes that this conversion to digital transmission leaves a great number of stations with limited programming and makes a substantial proportion of the public broadcasting library unusable. The Committee believes that this archive of material is a valuable asset to the public and to historians. Therefore, the Committee intends that CPB may spend a portion of the digital conversion funds to develop a digital public broadcasting archive pursuant to 47 U.S.C. 396(g)(2)(D). The Committee directs CPB to notify the Committee of the proposed level of funding for this activity before making any funds available.

In addition, the Committee recommends \$26,750,000 be made available in fiscal year 2008 for the initial stage in the replacement project of the radio interconnection system. In fiscal year 2007, \$34,650,000 was appropriated for this purpose. The budget request for fiscal year 2008 included authority to permit CPB to spend up to \$26,750,000 in previously appropriated fiscal year 2008 funds for the radio interconnection system.

FEDERAL MEDIATION AND CONCILIATION SERVICE

Appropriations, 2007 .....	\$42,849,000
Budget estimate, 2008 .....	43,800,000
Committee recommendation .....	44,450,000

The Committee recommends \$44,450,000 for fiscal year 2008 for the Federal Mediation and Conciliation Service [FMCS]. The comparable funding level for fiscal year 2007 was \$42,849,000 and the budget request for fiscal year 2008 includes \$43,800,000 for this program.

The FMCS was established by Congress in 1947 to provide mediation, conciliation, and arbitration services to labor and manage-

ment. FMCS is authorized to provide dispute resolution consultation and training to all Federal agencies.

Within the funds provided, \$400,000 is for the Labor-Management Cooperation grant program. The Committee continues to reject the administration's proposal to eliminate this program. The 1978 Labor-Management Cooperation Act authorized FMCS to encourage and support joint labor-management committees. This program awards grants to encourage these committees to develop innovative joint approaches to solve workplace problems. It has demonstrated success in improving workplace relationships and in instilling effective and efficient conflict resolution. The Committee strongly supports an approach to bridge labor-management relations prior to conflict.

#### FEDERAL MINE SAFETY AND HEALTH REVIEW COMMISSION

Appropriations, 2007 .....	\$7,778,000
Budget estimate, 2008 .....	8,096,000
Committee recommendation .....	8,096,000

The Committee recommends \$8,096,000 for fiscal year 2008 for the Federal Mine Safety and Health Review Commission. The comparable funding level for fiscal year 2007 was \$7,778,000 and the fiscal year 2008 budget request includes \$8,096,000.

The Federal Mine Safety and Health Review Commission provides administrative trial and appellate review of legal disputes under the Federal Mine Safety and Health Act of 1977. The five-member Commission provides review of the Commission's administrative law judge decisions.

#### INSTITUTE OF MUSEUM AND LIBRARY SERVICES

Appropriations, 2007 .....	\$247,205,000
Budget estimate, 2008 .....	271,246,000
Committee recommendation .....	266,680,000

The Committee recommends \$266,680,000 for fiscal year 2008 for the Institute of Museum and Library Services.

##### *Office of Museum Services Operations Grants*

The Committee recommends \$17,152,000 for operations grants. These funds support grants to museums for building increased public access, expanding educational services, reaching families and children, and using technology more effectively in support of these goals. In addition, non-competitive grants are awarded for technical assistance in four types of assessments: Institutional, Collections Management, Public Dimension, and Governance. In addition to the total recommended, \$7,920,000 has been provided for National Leadership Grants for Museums, \$982,000 has been provided for the 21st Century Museum Professionals program, \$442,000 for museum assessment, \$1,000,000 for Native American Museum service grants, and \$842,000 for Museum Grants for African American History and Culture.

##### *Museum Conservation Programs*

The Committee recommends \$3,579,000 for Conservation programs. These funds support grants to allow museums to survey col-

lections, perform training, research, treatment, and environmental improvements. In addition, grantees may receive additional funds to develop an education component that relates to their conservation project. In addition, non-competitive grants are awarded for technical assistance in conservation efforts.

*Museum National Leadership Projects*

The Committee recommends \$7,920,000 for National Leadership projects. The National Leadership Grants encourage innovation in meeting community needs, widespread and creative use of new technologies, greater public access to museum collections, and an extended impact of Federal dollars through collaborative projects.

*Office of Library Services State Grants*

The Committee recommends \$171,500,000 for State grants. This funding is sufficient to meet the authorization requirement for an increase in the minimum State grant. Funds are provided to States by formula to carry out 5-year State plans. These plans must set goals and priorities for the State consistent with the purpose of the act, describe activities to meet the goals and priorities and describe the methods by which progress toward the goals and priorities and the success of activities will be evaluated. States may apportion their funds between two activities, technology and targeted services. For technology, States may use funds for electronic linkages among libraries, linkages to educational, social and information services, accessing information through electronic networks, or link different types of libraries or share resources among libraries. For targeted services, States may direct library and information services to persons having difficulty using a library, underserved urban and rural communities, and children from low income families. In addition to the total recommended, \$3,817,000 has been provided for library services to Native Americans and Native Hawaiians. The Committee is aware that many traditional healers are aging and the world may soon lose the knowledge that they possess. For that reason, the Committee encourages IMLS to work for the preservation and documentation of Native Hawaiian traditional cultural healing practices. It is essential that these practices be documented in creative media formats due to the variety and complexity of the practices and the healers.

*Library National Leadership Projects*

The Committee recommends \$12,375,000 for national leadership projects. These funds support activities of national significance to enhance the quality of library services nationwide and to provide coordination between libraries and museums. Activities are carried out through grants and contracts awarded on a competitive basis to libraries, agencies, institutions of higher education and museums. Priority is given to projects that focus on education and training of library personnel, research and development for the improvement of libraries, preservation, digitization of library materials, partnerships between libraries and museums and other activities that enhance the quality of library services nationwide. In addition to the total recommended, \$23,760,000 has been provided for the Laura Bush 21st Century Librarian program.

*Museum and Library Services Administration*

The Committee recommends \$12,917,000 for program administration, the same as the budget request. Funds support personnel compensation and benefits, travel, rent, communications, utilities, printing, equipment and supplies, automated data processing, and other services. In addition to the total recommended, \$1,715,000 is for data collection activities formerly conducted by the National Commission on Libraries and Information Science.

The Committee recommendation also includes funding for the following organizations in the amounts specified:

Project	Committee recommendation	Requested by
Alaska Native Heritage Center, Anchorage, AK, for a partnership with Koahnic Broadcasting for a Native Values project.	\$250,000	Stevens
Archives Partnership Trust, New York, NY, to digitize fragile artifacts .....	100,000	Reid
Bethel Performing Arts Center, Liberty, NY, for the Museum at Bethel .....	1,000,000	Schumer, Clinton
Biographical Society of America, New York, NY, for the National First Ladies' Library in Canton, OH, for the First White House Library Catalogue.	130,000	Voinovich
Bishop Museum in Honolulu, HI, to enhance library services .....	150,000	Inouye
Bishop Museum, Honolulu, HI, to provide Filipino cultural education .....	250,000	Inouye
Boston Children's Museum, Boston, MA, for the development of exhibitions .....	200,000	Kennedy, Kerry
Dallas, Texas, for the Women's Museum to expand outreach and programming efforts.	200,000	Hutchison
Des Moines Art Center, Des Moines, IA, for exhibits .....	350,000	Harkin
Discovery Center of Idaho, Boise, Idaho, for exhibit displays, education programs and acquisition of equipment.	100,000	Crapo
Fairfield County Public Library, Winnsboro, SC, for acquisition of equipment to upgrade the library facilities.	100,000	Graham
Figge Art Museum, Davenport, Iowa, for exhibits, education programs, and community outreach.	400,000	Harkin
Florida Memorial University, Miami Gardens, FL, for upgrades to the Nathan W Collier Library.	200,000	Bill Nelson
Free Library of Philadelphia Foundation, Philadelphia, PA, for technology upgrades and acquisition.	100,000	Specter
Great Basin College, Elko, NV, to develop museum exhibits and conduct outreach to education programs.	350,000	Reid
Holbrook Public Library, Holbrook, MA, for the development of exhibits .....	150,000	Kennedy, Kerry
Iowa Radio Reading Information Service (IRRIIS), Des Moines, Iowa, to expand services.	250,000	Harkin
Italian-American Cultural Center of Iowa in Des Moines, IA for exhibits, multimedia collections, display.	200,000	Harkin
James K. Polk Association, Columbia, TN, for exhibit preparation at Polk Presidential Hall.	250,000	Alexander
Kellogg Hubbard Library, Montpelier, VT, for education and outreach .....	400,000	Leahy
Los Angeles Craft and Folk Art Museum, Los Angeles, CA, for education and outreach.	100,000	Feinstein, Boxer
Mid-America Arts Alliance, Kansas City, MO, for the HELP program .....	100,000	Ben Nelson
Museum of Afro-American History, Boston, MA, for the development of youth educational programs.	250,000	Kennedy, Kerry
Museum of Utah Art & History, Salt Lake City, Utah, to improve technology and exhibit preparation.	250,000	Bennett
New York Botanical Garden, Bronx, NY, for the Virtual Herbarium .....	500,000	Clinton, Schumer
Newport News, Virginia, to enhance library services .....	150,000	Warner, Webb
Oklahoma City National Memorial Foundation, Oklahoma City, OK, for educational programs and services.	100,000	Inhofe
Oklahoma Native American Cultural and Educational Authority, Oklahoma City, OK, for exhibits design.	100,000	Inhofe
Orem, Utah, for technological upgrades, equipment and resource sharing for the Orem public library.	300,000	Bennett, Hatch
Putnam Museum of History and Natural Science, Davenport, IA, for exhibits and community outreach.	400,000	Harkin, Grassley
Southwest Museum of the American Indian, Los Angeles, CA, for the Native American Learning Lab.	500,000	Feinstein, Boxer

Project	Committee recommendation	Requested by
Texas Historical Commission, Austin, TX, for educational programming, outreach, and exhibit development.	200,000	Hutchison
University of Vermont of Burlington, VT, for a digitization project .....	500,000	Leahy
Warner Robbins Museum of Aviation, Warner Robbins, GA, for multieducational programs and equipment acquisition.	100,000	Chambliss

#### MEDICARE PAYMENT ADVISORY COMMISSION

Appropriations, 2007 .....	\$12,066,000
Budget estimate, 2008 .....	10,748,000
Committee recommendation .....	10,748,000

The Committee recommends \$10,748,000 for fiscal year 2008 for the Medicare Payment Advisory Commission [MedPAC].

The Medicare Payment Advisory Commission was established by Congress as part of the Balanced Budget Act of 1997 (Public Law 1050933). Congress merged the Physician Payment Review Commission with the Prospective Payment Assessment Commission to create MedPAC.

#### NATIONAL COMMISSION ON LIBRARIES AND INFORMATION SCIENCE

Appropriations, 2007 .....	\$989,000
Budget estimate, 2008 .....	.....
Committee recommendation .....	400,000

The Committee recommends \$400,000 for fiscal year 2008 for the National Commission on Libraries and Information Science [NCLIS]. The administration budget for fiscal year 2008 requested that NCLIS be eliminated and the activities of the Commission be taken over by the Institute for Museum and Library Services. The Committee concurs with this request and has included \$400,000 for close out activities.

The Commission determined the need for, and made recommendations on, library and information services, and advised the President and Congress on the development and implementation of national policy in library and information sciences.

#### NATIONAL COUNCIL ON DISABILITY

Appropriations, 2007 .....	\$3,426,000
Budget estimate, 2008 .....	3,113,000
Committee recommendation .....	3,113,000

The Committee recommends \$3,113,000 for fiscal year 2008 for the National Council on Disability. One time funding was included in the Emergency Supplemental Appropriation Act of 2007 for technical assistance to the Department of Homeland Security.

The Council is mandated to make recommendations to the President, the Congress, the Rehabilitation Services Administration, and the National Institute on Disability and Rehabilitation Research, on the public issues of concern to individuals with disabilities. The Council gathers information on the implementation, effectiveness, and impact of the Americans with Disabilities Act and looks at emerging policy issues as they affect persons with disabilities and their ability to enter or reenter the Nation's work force and to live independently.

## NATIONAL LABOR RELATIONS BOARD

Appropriations, 2007 .....	\$251,507,000
Budget estimate, 2008 .....	256,238,000
Committee recommendation .....	256,988,000

The Committee recommends \$256,988,000 for fiscal year 2008 for the National Labor Relations Board [NLRB].

The NLRB is a law enforcement agency which adjudicates disputes under the National Labor Relations Act.

The mission of the NLRB is to carry out the statutory responsibilities of the National Labor Relations Act as efficiently as possible and in a manner that gives full effect to the rights afforded to employees, unions, and employers under the act.

## NATIONAL MEDIATION BOARD

Appropriations, 2007 .....	\$11,596,000
Budget estimate, 2008 .....	12,242,000
Committee recommendation .....	12,992,000

The Committee recommends \$12,992,000 for fiscal year 2008 for the National Mediation Board [NMB].

The National Mediation Board protects interstate commerce as it mediates labor-management relations in the railroad and airline industries under the Railway Labor Act. The Board mediates collective bargaining disputes, determines the choice of employee bargaining representatives through elections, and administers arbitration of employee grievances.

The Committee is deeply concerned that it takes the NMB arbiters 30 months on average to resolve a case. The Committee finds it equally distressing that the funding for arbitration cases routinely runs out several months before the end of the fiscal year. The Committee concludes that the administration has repeatedly underestimated the funding necessary to fulfill the arbitration portion of the NMB's mission. Therefore, within the funds provided, \$750,000 is to specifically address the backlog of cases held by the NMB. The Committee directs the NMB to provide detailed information as to how these funds are used and their impact on the backlog in the fiscal year 2009 budget justification.

## OCCUPATIONAL SAFETY AND HEALTH REVIEW COMMISSION

Appropriations, 2007 .....	\$10,471,000
Budget estimate, 2008 .....	10,696,000
Committee recommendation .....	10,696,000

The Committee recommends \$10,696,000 for fiscal year 2008 for the Occupational Safety and Health Review Commission.

The Commission serves as a court to justly and expeditiously resolve disputes between the Occupational Safety and Health Administration [OSHA] and employers charged with violations of health and safety standards enforced by OSHA.

## RAILROAD RETIREMENT BOARD

## DUAL BENEFITS PAYMENTS ACCOUNT

Appropriations, 2007 .....	\$88,000,000
Budget estimate, 2008 .....	79,000,000
Committee recommendation .....	79,000,000

The Committee recommends \$79,000,000 for fiscal year 2008 for the Dual Benefits Payments Account, of these funds \$6,000,000 is from income taxes on vested dual benefits.

This appropriation provides for vested dual benefit payments authorized by the Railroad Retirement Act of 1974, as amended by the Omnibus Reconciliation Act of 1981. This separate account, established for the payment of dual benefits, is funded by general fund appropriations and income tax receipts of vested dual benefits.

## FEDERAL PAYMENTS TO THE RAILROAD RETIREMENT ACCOUNT

Appropriations, 2007 .....	\$150,000
Budget estimate, 2008 .....	150,000
Committee recommendation .....	150,000

The Committee recommends \$150,000 for fiscal year 2008 for interest earned on non-negotiated checks.

## LIMITATION ON ADMINISTRATION

Appropriations, 2007 .....	\$103,694,000
Budget estimate, 2008 .....	103,518,000
Committee recommendation .....	103,694,000

The Committee recommends \$103,694,000 for fiscal year 2008 for the administration of railroad retirement/survivor benefit programs.

The Board administers comprehensive retirement-survivor and unemployment-sickness insurance benefit programs for the Nation's railroad workers and their families. This account limits the amount of funds in the railroad retirement and railroad unemployment insurance trust funds which may be used by the Board for administrative expenses.

The Committee has included language to prohibit funds from the railroad retirement trust fund from being spent on any charges over and above the actual cost of administering the trust fund, including commercial rental rates.

## LIMITATION ON THE OFFICE OF THE INSPECTOR GENERAL

Appropriations, 2007 .....	\$7,173,000
Budget estimate, 2008 .....	7,606,000
Committee recommendation .....	8,000,000

The Committee recommends \$8,000,000 for fiscal year 2008 for the Office of the Inspector General.

The Committee has included bill language to allow the Office of the Inspector General to use funds to conduct audits, investigations, and reviews of the Medicare program. The Committee finds that as long as the RRB has the authority to negotiate and administer the separate Medicare contract, the RRB Inspector General should not be prohibited from using funds to review, audit, or in-

investigate the Railroad Retirement Board's separate Medicare contract.

#### SOCIAL SECURITY ADMINISTRATION

##### PAYMENTS TO SOCIAL SECURITY TRUST FUNDS

Appropriations, 2007 .....	\$20,470,000
Budget estimate, 2008 .....	28,140,000
Committee recommendation .....	28,140,000

The Committee recommends an appropriation of \$28,140,000 for payments to Social Security trust funds. The comparable fiscal year 2007 funding level is \$20,470,000 and the budget request includes \$28,140,000 for this purpose. This amount reimburses the old age and survivors and disability insurance trust funds for special payments to certain uninsured persons, costs incurred administering pension reform activities, and the value of the interest for benefit checks issued but not negotiated. This appropriation restores the trust funds to the same financial position they would have been in had they not borne these costs, properly charged to the general funds.

##### SUPPLEMENTAL SECURITY INCOME

Appropriations, 2007 .....	\$29,071,169,000
Budget estimate, 2008 .....	26,911,000,000
Committee recommendation .....	26,959,000,000

The Committee recommends an appropriation of \$26,959,000,000 for supplemental security income. This is in addition to the \$16,810,000,000 appropriated last year as an advance for the first quarter of fiscal year 2008. The comparable fiscal year 2007 funding level is \$29,071,169,000 and the budget request includes \$26,911,000,000. The Committee also recommends an advance appropriation of \$14,800,000,000 for the first quarter of fiscal year 2009 to ensure uninterrupted benefits payments. The program level supported by the Committee recommendation is \$43,769,000,000, compared to the total program level requested in the budget of \$43,721,000,000.

These funds are used to pay benefits under the SSI Program, which was established to ensure a Federal minimum monthly benefit for aged, blind, and disabled individuals, enabling them to meet basic needs. It is estimated that approximately 7 million persons will receive SSI benefits each month during fiscal year 2008. In many cases, SSI benefits supplement income from other sources, including Social Security benefits. The funds are also used to reimburse the Social Security trust funds for the administrative costs for the program with a final settlement by the end of the subsequent fiscal year as required by law, to reimburse vocational rehabilitation agencies for costs incurred in successfully rehabilitating SSI recipients and for research and demonstration projects.

##### *Beneficiary Services*

The Committee recommends \$36,000,000 for beneficiary services, as proposed in the budget request. The availability of carryover budget authority allowed the Congress not to provide additional resources for this activity in fiscal year 2007. This amount is avail-

able for payments to Employment Networks for successful outcomes or milestone payments under the Ticket to Work program and for reimbursement of State vocational rehabilitation agencies and alternate public or private providers.

*Research and Demonstration Projects*

The Committee recommendation includes \$28,000,000 for research and demonstration projects conducted under sections 1110 and 1115 of the Social Security Act. The comparable fiscal year 2007 funding level and the budget request both are \$27,000,000 for authorized activities.

This amount will support SSA’s efforts to strengthen its policy evaluation capability and focus on research of: program issues, the impact of demographic changes on future workloads and effective return-to-work strategies for disabled beneficiaries.

The Committee recommendation includes \$1,000,000 to support activities of the National Center on Senior Benefits Outreach and Enrollment within the Administration on Aging [AOA]. SSA is directed to coordinate with AoA to utilize cost effective strategies to find and enroll those with greatest need in income maintenance, health and human services programs for which they are eligible.

*Administration*

The Committee recommendation includes \$3,030,000,000 for payment to the Social Security trust funds for the SSI Program’s share of SSA’s base administrative expenses. The comparable fiscal year 2007 amount is \$2,950,169,000 and the budget request includes \$2,983,000,000 for such activities.

LIMITATION ON ADMINISTRATIVE EXPENSES

Appropriations, 2007 .....	\$9,295,573,000
Budget estimate, 2008 .....	9,596,953,000
Committee recommendation .....	9,721,953,000

The Committee recommends a program funding level of \$9,721,953,000 for the limitation on administrative expenses. The comparable fiscal year 2007 funding level is \$9,295,573,000 and the budget request includes \$9,596,953,000 for this purpose.

This account provides resources from the Social Security trust funds to administer the Social Security retirement and survivors and disability insurance programs, and certain Social Security health insurance functions. As authorized by law, it also provides resources from the trust funds for certain nontrust fund administrative costs, which are reimbursed from the general funds. These include administration of the supplemental security income program for the aged, blind, and disabled; work associated with the Pension Reform Act of 1984; and the portion of the annual wage reporting work done by the Social Security Administration for the benefit of the Internal Revenue Service. The dollars provided also support automated data processing activities and fund the State disability determination services which make initial and continuing disability determinations on behalf of the Social Security Administration. Additionally, the limitation provides funding for computer support, and other administrative costs.

The Committee recommendation includes \$9,372,953,000 for routine operating expenses of the agency, as well as the resources related to program integrity activities and those derived from the user fees discussed below.

The Committee recommends \$125,000,000 more than the budget request to ensure that the backlog of disability claims will decrease, as opposed to increase as assumed under the budget request. The Committee is concerned that over the past several years resource limitations, increasing legislative mandates and ineffective administrative reform efforts have created a situation where the number of cases awaiting a hearing decision stands at 738,000, leading to average waiting times of 505 days, the highest ever in SSA history. The Committee requests a letter report not later than August 24, 2007, on current and planned initiatives to improve the disability process, including the status and results of the disability service improvement process being piloted in the New England region and efforts to improve the hearing process.

The budget request includes bill language earmarking not less than \$263,970,000 of funds available within this account for continuing disability reviews and redeterminations of eligibility under Social Security’s disability programs. An additional \$213,000,000 earmark for continuing disability reviews and redeterminations of eligibility also was proposed in the budget request. The Committee recommendation includes the requested resources and earmarking language.

Researchers at the Centers for Disease Control and Prevention have reported that Chronic Fatigue Syndrome is as disabling as chronic obstructive pulmonary disease, end-stage renal failure, and multiple sclerosis. The Committee has encouraged SSA officials to continue the education of adjudicators at all levels about the functional impact of CFS to ensure that they remain up to date on the appropriate evaluation of disability that results from this condition. Within 60 days of enactment of this act, the Committee requests a report from SSA on these ongoing educational activities as well as any plans to update the existing policy ruling on CFS, SSR 99–2p.

*Social Security Advisory Board*

The Committee has included not less than \$2,000,000 within the limitation on administrative expenses account for the Social Security Advisory Board for fiscal year 2008.

*User Fees*

In addition to other amounts provided, the Committee recommends \$136,000,000 for administrative activities funded from user fees. Of this amount, \$135,000,000 is derived from fees paid to SSA by States that request SSA to administer State SSI supplementary payments. The remaining \$1,000,000 will be generated from a fee payment process for non-attorney representatives of claimants.

OFFICE OF THE INSPECTOR GENERAL

Appropriations, 2007 .....	\$92,051,000
Budget estimate, 2008 .....	95,047,000
Committee recommendation .....	96,047,000

The Committee recommends \$96,047,000 for activities for the Office of the Inspector General. The comparable fiscal year 2007 funding level is \$92,051,000 and the budget request includes \$95,047,000 for this office. This includes a general fund appropriation of \$28,000,000 together with an obligation limitation of \$68,047,000 from the Federal old-age and survivors insurance trust fund and the Federal disability insurance trust fund.

## TITLE V—GENERAL PROVISIONS

The Committee recommendation includes provisions which: authorize transfers of unexpended balances (sec. 501); limit funding to 1 year availability unless otherwise specified (sec. 502); limit lobbying and related activities (sec. 503); limit official representation expenses (sec. 504); prohibit funding of any program to carry out distribution of sterile needles for the hypodermic injection of any illegal drug (sec. 505); clarify Federal funding as a component of State and local grant funds (sec. 506); limit use of funds for abortion (sec. 507 and sec. 508); restrict human embryo research (sec. 509); limit the use of funds for promotion of legalization of controlled substances included last year (sec. 510); prohibits the use of funds to promulgate regulations regarding the individual health identifier (sec. 511); limits use of funds to enter into or review contracts with entities subject to the requirement in section 4212(d) of title 38, United States Code, if the report required by that section has not been submitted (sec. 512); prohibits transfer of funds made available in this Act to any department, agency, or instrumentality of the U.S. Government, except as otherwise provided by this or any other act (sec. 513); prohibits Federal funding in this act for libraries and elementary and secondary schools unless they are in compliance with the Children's Internet Protection Act (sec. 514 and sec. 515); prohibits funds for the Railroad Retirement Board from being used for a non-governmental disbursing agent (sec. 516); maintains a provision clarifying procedures for reprogramming of funds (sec. 517); prohibits candidates for scientific advisory committees from having to disclose their political activities (sec. 518); includes a new provision that requires the Secretaries of Labor, Health and Human Services, and Education to submit a report on the number and amounts of contracts, grants, and cooperative agreements awarded by the Departments on a non-competitive basis (sec. 519); and includes a new provision that sets a new eligibility cut-off date for federally funded research on human embryonic stem cells (sec. 520).

BUDGETARY IMPACT OF BILL

PREPARED IN CONSULTATION WITH THE CONGRESSIONAL BUDGET OFFICE PURSUANT TO SEC. 308(a), PUBLIC LAW 93-344, AS AMENDED

[In millions of dollars]

	Budget authority		Outlays	
	Committee allocation	Amount of bill	Committee allocation	Amount of bill
Comparison of amounts in the bill with Committee allocations to its subcommittees of budget totals for 2008: Subcommittee on Labor, HHS, Education:				
Mandatory .....	455,281	455,281	455,156	<sup>1</sup> 455,156
Discretionary .....	149,236	149,872	147,183	<sup>1</sup> 147,553
Projection of outlays associated with the recommendation:				
2008 .....				<sup>2</sup> 512,978
2009 .....				65,622
2010 .....				14,711
2011 .....				3,331
2012 and future years .....				659
Financial assistance to State and local governments for 2008 .....	NA	275,018	NA	238,532

<sup>1</sup> Includes outlays from prior-year budget authority.

<sup>2</sup> Excludes outlays from prior-year budget authority.

NA: Not applicable.

NOTE.—Consistent with the funding recommended in the bill for continuing disability reviews and Supplemental Security Income [SSI] re-terminations, control of health care fraud and abuse, and reviews of improper unemployment insurance payments, and in accordance with subparagraphs A, C, and D of section 207(c)(2) of Senate Concurrent Resolution 21 (110th Congress), the Committee anticipates that the Budget Committee will file a revised section 302(a) allocation for the Committee on Appropriations reflecting an upward adjustment of \$636,000,000 in budget authority and associated outlays.

COMPLIANCE WITH PARAGRAPH 7, RULE XVI, OF THE STANDING RULES OF THE SENATE

Paragraph 7 of rule XVI requires that Committee report on general appropriations bills identify each Committee amendment to the House bill “which proposes an item of appropriation which is not made to carry out the provisions of an existing law, a treaty stipulation, or an act or resolution previously passed by the Senate during that session.”

The Committee is filing an original bill, which is not covered under this rule, but reports this information in the spirit of full disclosure.

The Committee recommends funding for the following programs and activities which currently lack authorization: Workforce Investment Act; Trade Act of 2002; Homeless Veterans Reintegration program; Title VII of the Public Health Services Act; Title VIII of the Public Health Services Act; Traumatic Brain Injury Programs; Universal Newborn Hearing Screening; Organ Transplantation; Rural Hospital Flexibility Grants; Denali Commission; Family Planning; State Offices of Rural Health; Rural and Community Access to Emergency Devices; health centers; National Health Service Corps; Healthy Start; telehealth; Infectious Diseases; Health Promotion;

Birth Defects; Health Information and Services; Environmental Health and Injury; Occupational Safety and Health; Global Health; Public Health Research; Public Health Improvement and Leadership; Preventive Health and Health Services Block Grant; CDC Business Services; Substance Abuse and Mental Health Services Programs, except for Stop Act programs; Agency for Healthcare Research and Quality; Low Income Home Energy Assistance Program; Refugee and Entrant Assistance programs; Adoption Awareness; Child Care and Development Block Grant; Head Start; Developmental Disabilities; Native American Programs; Community Services Block Grant; Rural Facilities; Individual Development Accounts; Community Economic Development; Alzheimer's Disease Demonstration Grants; Title V of the Public Health Services Act; Adolescent Family Life; Office of Minority Health; Office of Disease Prevention Services; Rehabilitation Services and Disability Research, except sections 4, 5 and 6 of the Assistive Technology Program; Higher Education Act; National Technical Institute for the Deaf; Gallaudet University; Corporation for National and Community Service; and National Council on Disability.

COMPLIANCE WITH PARAGRAPH 7(C), RULE XXVI OF THE  
STANDING RULES OF THE SENATE

Pursuant to paragraph 7(c) of rule XXVI, on June 21, 2007, the Committee ordered reported en bloc an original bill (S. 1710) making appropriations for the Departments of Labor, Health and Human Services, and Education, and related agencies for the fiscal year ending September 30, 2008, and authorized the chairman of the committee or the chairman of the subcommittee to offer the text of the Senate bill as a committee amendment in the nature of a substitute to the House companion measure, with the bill subject to amendment and subject to the budget allocations, by a recorded vote of 26–3, a quorum being present. The vote was as follows:

Yeas	Nays
Chairman Byrd	Mr. Nelson
Mr. Inouye	Mr. Gregg
Mr. Leahy	Mr. Brownback
Mr. Harkin	
Ms. Mikulski	
Mr. Kohl	
Mrs. Murray	
Mr. Dorgan	
Mrs. Feinstein	
Mr. Durbin	
Mr. Johnson	
Ms. Landrieu	
Mr. Reed	
Mr. Lautenberg	
Mr. Cochran	
Mr. Stevens	
Mr. Specter	
Mr. Domenici	
Mr. Bond	
Mr. McConnell	

Mr. Shelby  
Mr. Bennett  
Mr. Craig  
Mrs. Hutchison  
Mr. Allard  
Mr. Alexander

COMPLIANCE WITH PARAGRAPH 12, RULE XXVI OF THE  
STANDING RULES OF THE SENATE

Paragraph 12 of rule XXVI requires that Committee reports on a bill or a joint resolution repealing or amending any statute include "(a) the text of the statute or part thereof which is proposed to be repealed; and (b) a comparative print of that part of the bill or joint resolution making the amendment and of the statute or part thereof proposed to be amended, showing by stricken through type and italics, parallel columns, or other appropriate typographical devices the omissions and insertions which would be made by the bill or joint resolution if enacted in the form recommended by the committee."

The Committee bill as recommended contains no such provisions.

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 2007 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL  
FOR FISCAL YEAR 2008  
FOR FISCAL YEAR 2009  
[In thousands of dollars]

Item	2007 comparable	Budget estimate	Committee recommendation	Senate Committee recommendation compared with (+ or -)	
				2007 comparable	Budget estimate
TITLE I—DEPARTMENT OF LABOR					
EMPLOYMENT AND TRAINING ADMINISTRATION					
TRAINING AND EMPLOYMENT SERVICES					
Grants to States:					
Adult Training, current year	152,199	.....	152,199	.....	+ 152,199
Advance from prior year	(712,000)	(712,000)	(712,000)	(712,000)	.....
Fiscal year 2009	712,000	712,000	712,000	712,000	.....
Adult Training	864,199	712,000	864,199	.....	+ 152,199
Youth Training	940,500	840,500	940,500	.....	+ 100,000
Dislocated Worker Assistance, current year	341,811	54,939	341,811	.....	+ 286,872
Advance from prior year	(848,000)	(848,000)	(848,000)	.....	.....
Fiscal year 2009	848,000	848,000	848,000	.....	.....
Dislocated Worker Assistance	1,189,811	902,939	1,189,811	.....	+ 286,872
Subtotal, Grants to States	2,994,510	2,455,439	2,994,510	.....	+ 539,071
Current year	(1,434,510)	(895,439)	(1,434,510)	.....	(+ 539,071)
Fiscal year 2009	(1,560,000)	(1,560,000)	(1,560,000)	.....	.....
Federally Administered Programs:					
Dislocated Worker Assistance National Reserve:					
Current year	70,092	.....	70,092	.....	+ 70,092
Advance from prior year	(212,000)	(212,000)	(212,000)	.....	.....
Fiscal year 2009	212,000	212,000	212,000	.....	.....
Dislocated Worker Assistance Nat'l Reserve	282,092	212,000	282,092	.....	+ 70,092

	(- 125,000)		(- 125,000)		(- 125,000)
Less funding reserved for Community College Initiative (NA)					
Dislocated Worker Assistance Nat'l Reserve	157,092	212,000	157,092		- 54,908
Native Americans Programs	53,696	45,000	53,696		+ 8,696
Migrant and Seasonal Farmworkers Programs	79,752		79,752		+ 79,752
Women in Apprenticeship	1,000		1,000		+ 1,000
YouthBuild	49,500	50,000	65,000	+ 15,500	+ 15,000
Subtotal, Federally Administered Programs	466,040	307,000	481,540	+ 15,500	+ 174,540
Current Year	(254,040)	(95,000)	(269,540)	(+ 15,500)	(+ 174,540)
Fiscal year 2009	(212,000)	(212,000)	(212,000)		
National Activities:					
Pilots, Demonstrations and Research	14,700	13,000	30,650	+ 15,950	+ 17,650
Responsible Reintegration of Youthful Offender	49,104		55,000	+ 5,896	+ 55,000
Prisoner Re-entry	19,642			- 19,642	
Reintegration of Ex-offenders		39,600	13,642	+ 13,642	- 25,958
Evaluation	4,921	7,000	4,921		- 2,079
Community College initiative		150,000			- 150,000
Community College initiative (NA) 1	(125,000)		(125,000)		(+ 125,000)
Subtotal, CC initiative, program level	125,000	150,000	125,000		- 25,000
Denali Commission	6,875		6,875		+ 6,875
Other	480			- 480	
Subtotal, National activities	95,722	209,600	111,088	+ 15,366	- 98,512
Total, Training and Employment Services	3,556,272	2,972,039	3,587,138	+ 30,866	+ 615,099
Current Year	(1,784,272)	(1,200,039)	(1,815,138)	(+ 30,866)	(+ 615,099)
Fiscal year 2009	(1,772,000)	(1,772,000)	(1,772,000)		
COMMUNITY SERVICE EMPLOYMENT FOR OLDER AMERICANS	483,611	350,000	483,611		+ 133,611
FEDERAL UNEMPLOYMENT BENEFITS AND ALLOWANCES	837,600	888,700	888,700	+ 51,100	
STATE UNEMPLOYMENT INSURANCE AND EMPLOYMENT SERVICE OPERATIONS					
Unemployment Insurance (UI):					
State Operations	2,497,770	2,510,723	2,510,723	+ 12,953	
Additional UI Program Integrity		40,000	40,000	+ 40,000	
National Activities	9,900	10,500	10,500	+ 600	

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 2007 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL  
FOR FISCAL YEAR 2008—Continued  
(In thousands of dollars)

Item	2007 comparable	Budget estimate	Committee recommendation	Senate Committee recommendation compared with (+ or -)	
				2007 comparable	Budget estimate
Subtotal, Unemployment Insurance .....	2,507,670	2,561,223	2,561,223	+ 53,553	.....
Employment Service:					
Allotments to States:					
Federal Funds .....	22,883	22,016	22,883	.....	+ 867
Trust Funds .....	693,000	666,763	693,000	.....	+ 26,237
Subtotal, allotments to States .....	715,883	688,779	715,883	.....	+ 27,104
ES National Activities .....	33,428	32,766	34,000	+ 572	+ 1,234
Subtotal, Employment Service .....	749,311	721,545	749,883	+ 572	+ 28,338
Federal Funds .....	22,883	22,016	22,883	.....	+ 867
Trust Funds .....	726,428	699,529	727,000	+ 572	+ 27,471
One-Stop Career Centers/Labor Market Information .....	63,855	55,985	55,985	- 7,870	.....
Work Incentives Grants .....	19,514	.....	19,541	+ 27	+ 19,541
Total, State Unemployment & Employment Svcs .....	3,340,350	3,338,753	3,386,632	+ 46,282	+ 47,879
Federal Funds .....	106,252	78,001	98,409	- 7,843	+ 20,408
Trust Funds .....	(3,234,098)	(3,260,752)	(3,288,223)	(+ 54,125)	(+ 27,471)
ADVANCES TO THE UI AND OTHER TRUST FUNDS .....	465,000	437,000	437,000	- 28,000	.....
PROGRAM ADMINISTRATION					
Adult Employment and Training .....	43,442	45,593	44,593	+ 1,151	- 1,000
Trust Funds .....	7,846	8,283	7,846	.....	- 437
Youth Employment and Training <sup>2</sup> .....	39,354	40,311	11,439	- 27,915	- 28,872
Employment Security .....	6,354	6,376	6,376	+ 22	.....
Trust Funds .....	72,113	84,436	84,436	+ 12,323	.....
Apprenticeship Services .....	21,542	21,725	21,725	+ 183	.....
Executive Direction <sup>2</sup> .....	6,967	7,250	7,000	+ 33	- 250

Trust Funds .....	2,090	2,188	2,090	.....	-98
Total, Program Administration .....	199,708	216,162	185,505	-14,203	-30,657
Federal Funds .....	117,659	121,255	91,133	-26,526	-30,122
Trust Funds .....	82,049	94,907	94,372	+12,323	-535
Total, Employment and Training Administration .....	8,882,541	8,202,654	8,968,586	+86,045	+765,932
Federal Funds .....	5,566,394	4,846,995	5,585,991	+19,597	+738,996
Current Year .....	(3,794,394)	(3,074,995)	(3,813,991)	(+19,597)	(+738,996)
Fiscal year 2009 .....	(1,772,000)	(1,772,000)	(1,772,000)	.....	.....
Trust Funds .....	3,316,147	3,355,659	3,382,595	+66,448	+26,936
EMPLOYEE BENEFITS SECURITY ADMINISTRATION					
SALARIES AND EXPENSES					
Enforcement and Participant Assistance .....	118,718	123,163	119,000	+282	-4,163
Policy and Compliance Assistance .....	17,585	18,315	18,315	+730	.....
Executive Leadership, Program Oversight and Admin .....	5,270	5,947	5,947	+677	.....
Total, EBSA .....	141,573	147,425	143,262	+1,689	-4,163
PENSION BENEFIT GUARANTY CORPORATION					
Pension insurance activities .....	(80,357)	(74,784)	(74,784)	(-5,573)	.....
Pension plan termination .....	(128,466)	(205,158)	(205,158)	(+76,692)	.....
Operational support .....	(196,567)	(131,209)	(131,209)	(-65,358)	.....
Total, PBGC (Program level) .....	(405,390)	(411,151)	(411,151)	(+5,761)	.....
EMPLOYMENT STANDARDS ADMINISTRATION					
SALARIES AND EXPENSES					
Enforcement of Wage and Hour Standards .....	170,220	182,365	184,365	+14,145	+2,000
Office of Labor-Management Standards .....	47,753	56,888	45,737	-2,016	-11,151
Federal Contractor EEO Standards Enforcement .....	82,441	84,182	84,182	+1,741	.....
Federal Programs for Workers' Compensation .....	100,889	104,478	104,478	+3,589	.....
Trust Funds .....	2,042	2,111	2,111	+69	.....
Program Direction and Support .....	17,526	17,635	17,635	+109	.....
Total, ESA salaries and expenses .....	420,871	447,659	438,508	+17,637	-9,151
Federal Funds .....	418,829	445,548	436,397	+17,568	-9,151
Trust Funds .....	2,042	2,111	2,111	+69	.....

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 2007 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL  
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Item	2007 comparable	Budget estimate	Committee recommendation	Senate Committee recommendation compared with (+ or -)	
				2007 comparable	Budget estimate
<b>SPECIAL BENEFITS</b>					
Federal employees compensation benefits .....	224,000	200,000	200,000	-24,000	.....
Longshore and harbor workers' benefits .....	3,000	3,000	3,000	.....	.....
Total, Special Benefits .....	227,000	203,000	203,000	-24,000	.....
<b>SPECIAL BENEFITS FOR DISABLED COAL MINERS</b>					
Benefit payments .....	298,000	271,000	271,000	-27,000	.....
Administration .....	5,373	5,221	5,221	-152	.....
Subtotal, fiscal year 2008 program level .....	303,373	276,221	276,221	-27,152	.....
Less funds advanced in prior year .....	-74,000	-68,000	-68,000	+6,000	.....
Total, Current Year, fiscal year 2008 .....	229,373	208,221	208,221	-21,152	.....
New advances, 1st quarter fiscal year 2009 .....	68,000	62,000	62,000	-6,000	.....
Total, Special Benefits for Disabled Coal Miners .....	297,373	270,221	270,221	-27,152	.....
Energy Employees Occupational Illness Compensation Fund, Administrative Expenses .....	102,307	104,745	104,745	+2,438	.....
<b>BLACK LUNG DISABILITY TRUST FUND</b>					
Benefit payments and interest on advances .....	1,010,011	1,009,763	1,009,763	-248	.....
Employment Standards Admin., Salaries and expenses .....	33,578	32,761	32,761	-817	.....
Departmental Management, Salaries and expenses .....	25,255	24,785	24,785	-470	.....
Departmental Management, Inspector General .....	346	335	335	-11	.....
Subtotal, Black Lung Disability .....	1,069,190	1,067,644	1,067,644	-1,546	.....
Treasury Department Administrative Costs .....	356	356	356	.....	.....

Total, Black Lung Disability Trust Fund .....	1,069,546	1,068,000	1,068,000	- 1,546	.....
Total, Employment Standards Administration .....	2,117,097	2,093,625	2,084,474	- 32,623	- 9,151
Federal Funds .....	2,115,055	2,091,514	2,082,363	- 32,692	- 9,151
Current year .....	(2,047,055)	(2,029,514)	(2,020,363)	(- 26,692)	(- 9,151)
Fiscal year 2009 .....	(68,000)	(62,000)	(62,000)	(- 6,000)	.....
Trust Funds .....	2,042	2,111	2,111	+ 69	.....
OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION					
SALARIES AND EXPENSES					
Safety and Health Standards .....	16,892	16,851	16,892	.....	+ 41
Federal Enforcement .....	176,973	183,046	188,005	+ 11,032	+ 4,959
State Programs .....	91,093	91,093	91,093	.....	.....
Technical Support .....	22,392	22,066	22,066	- 326	.....
Compliance Assistance:					
Federal Assistance .....	72,659	79,607	72,659	.....	- 6,948
State Consultation Grants .....	53,357	54,531	54,531	+ 1,174	.....
Training Grants .....	10,116	.....	10,116	.....	+ 10,116
Subtotal, Compliance Assistance .....	136,132	134,138	137,306	+ 1,174	+ 3,168
Safety and Health Statistics .....	32,274	32,082	32,082	- 192	.....
Executive Direction and Administration .....	11,169	11,001	11,001	- 168	.....
Total, OSHA .....	486,925	490,277	498,445	+ 11,520	+ 8,168
MINE SAFETY AND HEALTH ADMINISTRATION					
SALARIES AND EXPENSES					
Coal Enforcement .....	120,396	140,620	147,420	+ 27,024	+ 6,800
Metal/Non-Metal Enforcement .....	72,506	72,290	72,690	+ 184	+ 400
Standards Development .....	2,727	2,737	3,237	+ 510	+ 500
Assessments .....	6,556	5,743	6,243	- 313	+ 500
Educational Policy and Development .....	35,326	34,256	37,256	+ 1,930	+ 3,000
Technical Support .....	29,237	28,200	30,000	+ 763	+ 1,800
Program evaluation and information resources (PEIR) .....	21,185	16,219	16,219	- 4,966	.....
Program Administration .....	13,637	13,413	16,963	+ 3,326	+ 3,550
Total, Mine Safety and Health Administration .....	301,570	313,478	330,028	+ 28,458	+ 16,550

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<b>BUREAU OF LABOR STATISTICS</b>					
<b>SALARIES AND EXPENSES</b>					
Employment and Unemployment Statistics .....	169,722	175,320	174,320	+ 4,598	- 1,000
Labor Market Information .....	77,067	78,264	78,000	+ 933	- 264
Prices and Cost of Living .....	177,847	192,149	178,992	+ 1,145	- 13,157
Compensation and Working Conditions .....	81,658	84,859	85,859	+ 4,201	+ 1,000
Productivity and Technology .....	11,332	11,063	11,063	.....	- 269
Executive Direction and Staff Services .....	30,766	32,519	31,766	+ 1,000	- 753
Total, Bureau of Labor Statistics .....	548,123	574,443	560,000	+ 11,877	- 14,443
Federal Funds .....	471,056	496,179	482,000	+ 10,944	- 14,179
Trust Funds .....	77,067	78,264	78,000	+ 933	- 264
<b>OFFICE OF DISABILITY EMPLOYMENT POLICY</b>					
Salaries and expenses .....	27,712	18,602	27,712	.....	+ 9,110
<b>DEPARTMENTAL MANAGEMENT</b>					
<b>SALARIES AND EXPENSES</b>					
Executive Direction .....	28,189	28,680	28,680	+ 491	.....
Departmental IT Crosscut .....	29,462	31,405	22,000	- 7,462	- 9,405
Departmental Management Crosscut .....	1,108	750	750	- 358	.....
Legal Services .....	85,488	95,162	95,162	+ 9,674	.....
Trust Funds .....	308	318	318	+ 10	.....
International Labor Affairs .....	72,516	14,097	82,516	+ 10,000	+ 68,419
Administration and Management .....	32,865	33,362	33,362	+ 497	.....
Adjudication .....	27,537	28,289	28,289	+ 752	.....
Women's Bureau .....	9,666	9,832	10,300	+ 634	+ 468
Civil Rights Activities .....	6,445	6,763	6,763	+ 318	.....

Chief Financial Officer .....	5,336	5,578	5,578	+242	.....
Total Salaries and expenses .....	298,920	254,236	313,718	+14,798	+59,482
Federal Funds .....	298,612	253,918	313,400	+14,788	+59,482
Trust Funds .....	308	318	318	+10	.....
OFFICE OF JOB CORPS <sup>3</sup>					
Administration <sup>2</sup> .....	879,357	831,372	28,872	+28,872	+28,872
Operations .....	(591,000)	(591,000)	925,000	+45,643	+93,628
Advance from prior year .....	591,000	591,000	(591,000)	.....	.....
Fiscal year 2009 .....	7,920	.....	591,000	.....	.....
Construction and Renovation .....	.....	.....	15,000	+7,080	+15,000
Advance from prior year .....	(100,000)	(100,000)	(100,000)	.....	.....
Fiscal year 2009 .....	100,000	100,000	100,000	.....	.....
Total, Job Corps .....	1,578,277	1,522,372	1,659,872	+81,595	+137,500
VETERANS EMPLOYMENT AND TRAINING					
State administration, Grants .....	160,791	161,894	161,894	+1,103	.....
Federal Administration .....	31,187	33,282	33,282	+2,095	.....
National Veterans' Training Institute .....	1,967	1,949	1,967	.....	+18
Homeless Veterans Program .....	21,809	23,620	23,620	+1,811	.....
Veterans Workforce Investment Programs .....	7,435	7,351	7,435	.....	+84
Total, Veterans Employment and Training .....	223,189	228,096	228,198	+5,009	+102
Federal Funds .....	29,244	30,971	31,055	+1,811	+84
Trust Funds .....	193,945	197,125	197,143	+3,198	+18
OFFICE OF INSPECTOR GENERAL					
Program Activities .....	67,214	72,929	73,929	+6,715	+1,000
Trust Funds .....	5,552	5,729	5,729	+177	.....
Total, Office of Inspector General .....	72,766	78,658	79,658	+6,892	+1,000
Federal funds .....	67,214	72,929	73,929	+6,715	+1,000
Trust funds .....	5,552	5,729	5,729	+177	.....
Total, Departmental Management .....	2,173,152	2,083,362	2,281,446	+108,294	+198,084
Federal Funds .....	1,973,347	1,880,190	2,078,256	+104,909	+198,066
Current Year .....	(1,282,347)	(1,189,190)	(1,387,256)	(+104,909)	(+198,066)
Fiscal year 2009 .....	(691,000)	(691,000)	(691,000)	.....	.....

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Trust Funds .....	199,805	203,172	203,190	+ 3,385	+ 18
WORKING CAPITAL FUND .....	6,168	12,000	.....	- 6,168	- 12,000
Total, Title I, Department of Labor .....	14,684,861	13,935,866	14,893,953	+ 209,092	+ 958,087
Federal Funds .....	11,089,800	10,296,660	11,228,057	+ 138,257	+ 931,397
Current Year .....	(8,558,800)	(7,771,660)	(8,703,057)	(+ 144,257)	(+ 931,397)
Fiscal year 2009 .....	(2,531,000)	(2,525,000)	(2,525,000)	(- 6,000)	.....
Trust Funds .....	3,595,061	3,639,206	3,665,896	+ 70,835	+ 26,690
TITLE II—DEPARTMENT OF HEALTH AND HUMAN SERVICES					
HEALTH RESOURCES AND SERVICES ADMINISTRATION					
HEALTH RESOURCES AND SERVICES					
BUREAU OF PRIMARY HEALTH CARE					
Community health centers .....	1,988,039	1,988,467	2,238,039	+ 250,000	+ 249,572
Free Clinics Medical Malpractice .....	41	100	40	- 1	- 60
National Hansen's Disease Services .....	15,972	16,109	16,500	+ 528	+ 391
Buildings and Facilities .....	220	100	220	.....	+ 120
Payment to Hawaii, treatment of Hansen's .....	1,996	1,976	1,996	.....	+ 20
Subtotal, Bureau of Primary Health Care .....	2,006,268	2,006,752	2,256,795	+ 250,527	+ 250,043
BUREAU OF HEALTH PROFESSIONS					
National Health Service Corps:					
Field placements .....	40,443	30,729	40,443	.....	+ 9,714
Recruitment .....	85,230	85,230	85,230	.....	.....
Subtotal, National Health Service Corps .....	125,673	115,959	125,673	.....	+ 9,714

HEALTH PROFESSIONS					
Training for Diversity:					
Centers of excellence .....	11,880			11,880	
Health careers opportunity program .....	3,960			3,960	+ 11,880
Faculty loan repayment .....	1,289			1,289	+ 3,960
Scholarships for disadvantaged students .....	46,657	9,733		46,657	+ 1,289
					+ 36,924
Subtotal, Training for Diversity .....	63,786	9,733		63,786	+ 54,053
Training in Primary Care Medicine and Dentistry .....					
	48,851			48,851	+ 48,851
Interdisciplinary Community-Based Linkages:					
Area health education centers .....	28,681			28,681	+ 28,681
Allied health and other disciplines .....	3,960			3,960	+ 5,960
Geriatric education .....	31,548			31,548	+ 31,548
Subtotal, Interdisciplinary Comm. Linkages .....	64,189			64,189	+ 66,189
Public health, preventive med. and dental programs .....	7,920			8,920	+ 8,920
Nursing Programs:					
Advanced Education Nursing .....	57,061			68,889	+ 68,889
Nurse education, practice, and retention .....	37,291			37,291	
Nursing workforce diversity .....	16,107			16,107	+ 11,828
Loan repayment and scholarship program .....	31,055			36,000	
Comprehensive geriatric education .....	3,392			3,392	- 7,744
Nursing faculty loan program .....	4,773			8,000	+ 4,945
Subtotal, Nursing programs .....	149,679	105,307		169,679	+ 3,227
					+ 64,372
Subtotal, Health Professions .....					
	334,425	115,040		357,425	+ 242,385
Children's Hospitals Graduate Medical Education .....	297,009	110,018		200,000	+ 89,982
National Practitioner Data Bank .....	16,200	18,900		18,900	+ 2,700
User Fees .....	-16,200	-18,900		-18,900	-2,700
Health Care Integrity and Protection Data Bank .....	3,825			3,825	+ 3,825
User Fees .....	-3,825			-3,825	-3,825
Subtotal, Bureau of Health Professions .....	757,107	341,017		683,098	+ 342,081
MATERNAL AND CHILD HEALTH BUREAU					
Maternal and Child Health Block Grant .....	673,000	673,000		673,000	

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[In thousands of dollars]

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Autism and Other Developmental Disorders <sup>4</sup> .....	20,000	20,000	37,000	+17,000	+17,000
Sickle cell anemia demonstration program .....	2,180	2,184	3,180	+1,000	+996
Traumatic Brain Injury .....	8,910	10,000	10,000	+1,090	+10,000
Healthy Start .....	101,518	100,503	101,518	.....	+1,015
Universal Newborn Hearing .....	9,804	12,000	12,000	+2,196	+12,000
Emergency medical services for children .....	19,800	.....	20,000	+200	+20,000
Subtotal, Maternal and Child Health Bureau .....	835,212	795,687	856,698	+21,486	+61,011
HIV/AIDS BUREAU					
Ryan White AIDS Programs:					
Emergency Assistance .....	603,993	603,993	603,993	.....	.....
Comprehensive Care Programs .....	1,195,500	1,215,518	1,225,518	+30,018	+10,000
AIDS Drug Assistance Program (ADAP) (NA) .....	(789,546)	(814,546)	(814,546)	(+25,000)	.....
Early Intervention Program .....	193,722	199,821	193,622	-100	-6,199
Children, Youth, Women, and Families .....	71,794	71,794	75,000	+3,206	+3,206
AIDS Dental Services .....	13,086	13,086	13,086	.....	.....
Education and Training Centers .....	34,700	28,700	34,700	.....	+6,000
Subtotal, Ryan White AIDS programs .....	2,112,795	2,132,912	2,145,919	+33,124	+13,007
Evaluation Tap Funding (NA) .....	(25,000)	(25,000)	(25,000)	.....	.....
Subtotal, Ryan White AIDS program level .....	(2,137,795)	(2,157,912)	(2,170,919)	(+33,124)	(+13,007)
Subtotal, HIV/AIDS Bureau .....	2,112,795	2,132,912	2,145,919	+33,124	+13,007
HEALTHCARE SYSTEMS BUREAU					
Organ Transplantation .....	23,049	23,049	25,049	+2,000	+2,000
National Cord Blood Inventory .....	3,963	1,966	12,000	+8,037	+10,034
Bone Marrow Program .....	25,168	22,701	22,701	-2,467	.....
Office of Pharmacy Affairs .....	.....	2,940	2,940	+2,940	.....

	23,000	10,000	23,000	.....	+ 13,000
Poison control .....	75,180	60,656	85,690	+ 10,510	+ 25,034
Subtotal, Healthcare systems bureau .....					
RURAL HEALTH PROGRAMS					
Rural outreach grants .....	38,885	.....	40,000	+ 1,115	+ 40,000
Rural Health Research .....	8,737	8,737	9,500	+ 763	+ 763
Rural Hospital Flexibility Grants .....	63,538	.....	38,538	- 25,000	+ 38,538
Delta Health Initiative <sup>5</sup> .....	.....	.....	25,000	+ 25,000	+ 25,000
Rural and community access to emergency devices .....	.....	.....	3,000	+ 1,513	+ 3,000
State Offices of Rural Health .....	8,141	8,141	9,000	+ 859	+ 859
Black lung clinics .....	5,891	5,886	6,000	+ 109	+ 114
Radiation Exposure Screening and Education Program <sup>5</sup> .....	1,919	1,904	1,917	- 2	+ 13
Denalt Commission .....	39,283	.....	39,283	.....	+ 39,283
Subtotal, Rural health programs .....	167,881	24,668	172,238	+ 4,357	+ 147,570
Family Planning .....	283,146	283,103	300,000	+ 16,854	+ 16,897
Health Care-related Facilities and Activities .....	.....	.....	191,235	+ 191,235	+ 191,235
Telehealth .....	6,819	6,819	7,000	+ 181	+ 181
Program Management .....	146,294	144,191	145,000	- 1,294	+ 809
Total, Health resources and services .....	6,390,702	5,795,805	6,843,673	+ 452,971	+ 1,047,868
Total, Health resources & services program level .....	(6,415,702)	(5,820,805)	(6,868,673)	( + 452,971)	( + 1,047,868)
Evaluation tap funding .....	(25,000)	(25,000)	(25,000)	.....	.....
HEALTH EDUCATION ASSISTANCE LOANS (HEAL) PROGRAM:					
Liquidating account .....	(4,000)	(1,000)	(1,000)	( - 3,000)	.....
Program management .....	2,898	2,906	2,906	+ 8	.....
Total, HEAL .....	2,898	2,906	2,906	+ 8	.....
VACCINE INJURY COMPENSATION PROGRAM TRUST FUND:					
Post-fiscal year 1988 claims .....	55,871	57,547	57,547	+ 1,676	.....
HRSA administration .....	3,982	3,528	3,528	- 454	.....
Total, Vaccine Injury Compensation Trust Fund .....	59,853	61,075	61,075	+ 1,222	.....
Total, Health Resources and Services Admin .....	6,453,453	5,859,786	6,907,654	+ 454,201	+ 1,047,868
Total, HRSA program level .....	(6,482,453)	(5,885,786)	(6,933,654)	( + 451,201)	( + 1,047,868)

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<b>CENTERS FOR DISEASE CONTROL AND PREVENTION</b>					
Infectious Diseases .....	1,791,437	1,781,574	1,762,083	-29,354	-19,491
Evaluation Tap Funding .....	(12,794)	(12,794)	(12,794)		
Subtotal, Program level .....	(1,804,231)	(1,794,368)	(1,774,877)	(-29,354)	(-19,491)
Health Promotion .....	959,662	958,732	979,876	+20,214	+21,144
Health Information and Service .....	88,418	108,361	98,854	+10,436	-9,507
Evaluation Tap Funding .....	(134,235)	(135,135)	(133,799)	(-436)	(-1,336)
Subtotal, Program level .....	(222,653)	(243,496)	(232,653)	(+10,000)	(-10,843)
Environmental health and injury .....	288,104	287,674	296,338	+8,234	+8,664
Occupational safety and health <sup>6</sup> .....	167,028	165,927	180,326	+13,298	+14,399
Evaluation Tap Funding .....	(87,071)	(87,071)	(92,071)	(+5,000)	(+5,000)
Subtotal, Program level <sup>6</sup> .....	(254,099)	(252,998)	(272,397)	(+18,298)	(+19,399)
Global health .....	334,038	379,719	334,038		-45,681
Terrorism preparedness and response .....	1,541,300	1,504,375	1,632,448	+91,148	+128,073
Public Health research: Federal Funds .....					
Evaluation Tap Funding .....	(31,000)	(31,000)	(31,000)		
Subtotal, Program level .....	(31,000)	(31,000)	(31,000)		
Public health improvement and leadership .....	189,808	190,412	209,829	+20,021	+19,417
Preventive health and health services block grant .....	99,000		99,000		+99,000
Buildings and Facilities .....	134,400	20,000	220,000	+85,600	+200,000
Business services .....	344,377	319,877	344,377		+24,500

Total, Centers for Disease Control Evaluation Tap Funding (NA)	5,937,572 (266,000) (6,202,672)	5,716,651 (266,000) (5,982,651)	6,157,169 (269,664) (6,426,833)	+219,597 (+4,564) (+224,161)	+440,518 (+3,664) (+444,182)
Total, Centers for Disease Control program level					
NATIONAL INSTITUTES OF HEALTH					
National Cancer Institute	4,797,639	4,782,114	4,910,160	+12,521	+128,046
National Heart, Lung, and Blood Institute	2,922,929	2,925,413	2,992,197	+69,268	+66,784
National Institute of Dental & Craniofacial Research	389,703	389,722	398,602	+8,899	+8,880
National Institute of Diabetes and Digestive and Kidney Diseases	1,705,868	1,708,045	1,747,784	+41,916	+39,739
Juvenile diabetes (mandatory)	(150,000)	(150,000)	(150,000)		
Subtotal, NIDDK	(1,855,868)	(1,858,045)	(1,897,784)	(+41,916)	(+39,739)
National Institute of Neurological Disorders & Stroke	1,535,545	1,537,019	1,573,268	+37,223	+36,249
National Institute of Allergy & Infectious Diseases <sup>7</sup>	4,268,708	4,292,482	4,368,472	+99,764	+75,990
Global HIV/AIDS Fund Transfer	99,000	300,000	300,000	+201,000	
Subtotal, NIAID	4,367,708	4,592,482	4,668,472	+300,764	+75,990
National Institute of General Medical Sciences	1,935,808	1,941,462	1,978,601	+42,793	+37,139
National Institute of Child Health & Human Development	1,254,707	1,264,946	1,282,231	+27,524	+17,285
National Eye Institute	667,116	667,820	681,962	+14,846	+14,142
National Institute of Environmental Health Sciences	642,002	637,406	656,176	+14,174	+18,770
National Institute on Aging	1,047,260	1,047,148	1,073,048	+25,788	+25,900
National Institute of Arthritis and Musculoskeletal and Skin Diseases	508,240	508,082	519,810	+11,570	+11,728
National Institute on Deafness and Other Communication Disorders	393,668	393,682	402,680	+9,012	+8,998
National Institute of Nursing Research	137,404	137,800	140,456	+3,052	+2,656
National Institute on Alcohol Abuse and Alcoholism	436,259	436,505	445,702	+9,443	+9,197
National Institute on Drug Abuse	1,000,621	1,000,365	1,022,594	+21,973	+22,229
National Institute of Mental Health	1,404,494	1,405,421	1,436,001	+31,507	+30,580
National Human Genome Research Institute	486,491	484,436	497,031	+10,540	+12,595
National Institute of Biomedical Imaging and Bioengineering	296,887	300,463	304,319	+7,432	+3,856
National Center for Research Resources	1,133,240	1,112,498	1,177,997	+44,757	+65,499
National Center for Complementary and Alternative Medicine	121,576	124,213	124,213	+2,637	+2,514
National Center on Minority Health and Health Disparities	199,444	194,495	203,895	+4,451	+9,400
John E. Fogarty International Center	66,446	66,594	68,000	+1,554	+1,406
National Library of Medicine	320,850	312,562	327,817	+6,967	+15,255
Evaluation Tap Funding	(8,200)	(8,200)	(8,200)		
Subtotal, NLM	329,050	320,762	336,017	+6,967	+15,255

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 2007 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL  
FOR FISCAL YEAR 2008—Continued

[In thousands of dollars]

Item	2007 comparable	Budget estimate	Committee recommendation	Senate Committee recommendation compared with (+ or -)	
				2007 comparable	Budget estimate
Office of the Director <sup>7</sup> .....					
Common Fund (Non-Add) .....	1,046,901	517,062	1,145,790	+ 98,889	+ 628,728
Buildings and Facilities .....	(483,000)	(121,540)	(531,300)	(+ 48,300)	(+ 409,760)
	81,081	136,000	121,081	+ 40,000	- 14,919
Total, National Institutes of Health (NIH) .....	28,899,887	28,621,241	29,899,887	+ 1,000,000	+ 1,278,646
Global HIV/AIDS Fund Transfer .....	- 99,000	- 300,000	- 300,000	- 201,000	.....
Evaluation Tap Funding .....	(8,200)	(8,200)	(8,200)	.....	.....
Total, NIH, Program Level .....	(28,809,087)	(28,329,441)	(29,608,087)	(+ 799,000)	(+ 1,278,646)
SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION (SAMHSA)					
Mental Health:					
Programs of Regional and National Significance .....	263,263	186,633	298,217	+ 34,954	+ 111,584
Mental Health block grant .....	406,843	406,843	406,843	.....	.....
Evaluation Tap Funding .....	(21,413)	(21,413)	(21,413)	.....	.....
Subtotal, Program level .....	(428,256)	(428,256)	(428,256)	.....	.....
Children's Mental Health .....	104,078	104,078	104,078	.....	.....
Grants to States for the Homeless (PATH) .....	54,261	54,261	54,261	.....	.....
Protection and Advocacy .....	34,000	34,000	39,000	+ 5,000	+ 5,000
Subtotal, Mental Health .....	862,445	785,815	902,399	+ 39,954	+ 116,584
Subtotal, Program level .....	(883,858)	(807,228)	(923,812)	(+ 39,954)	(+ 116,584)
Substance Abuse Treatment:					
Programs of Regional and National Significance .....	394,649	347,790	422,268	+ 27,619	+ 74,478
Evaluation Tap Funding .....	(4,300)	(4,300)	(4,300)	.....	.....
Subtotal, Program level .....	(398,949)	(352,090)	(426,568)	(+ 27,619)	(+ 74,478)

Substance Abuse block grant	1,679,391	1,679,391	1,679,391	.....	.....
Evaluation Tap Funding	(79,200)	(79,200)	(79,200)	.....	.....
Subtotal, Program level	(1,758,591)	(1,758,591)	(1,758,591)	.....	.....
Subtotal, Substance Abuse Treatment	2,074,040	2,027,181	2,101,659	+ 27,619	+ 74,478
Subtotal, Program level	(2,157,540)	(2,110,681)	(2,185,159)	(+ 27,619)	(+ 74,478)
Substance Abuse Prevention:					
Programs of Regional and National Significance	192,902	156,461	197,108	+ 4,206	+ 40,647
Program Management	76,721	76,969	76,969	+ 248	.....
Evaluation Tap funding (NA)	(16,000)	(16,250)	(21,750)	(+ 5,750)	(+ 5,500)
Subtotal, Program level	92,721	93,219	98,719	+ 5,998	+ 5,500
Total, SAMHSA	3,206,108	3,046,426	3,278,135	+ 72,027	+ 231,709
Evaluation Tap funding	(120,913)	(121,163)	(126,663)	(+ 5,750)	(+ 5,500)
Total, SAMHSA program level	(3,327,021)	(3,167,589)	(3,404,798)	(+ 77,777)	(+ 237,209)
AGENCY FOR HEALTHCARE RESEARCH AND QUALITY					
Research on Health Costs, Quality, and Outcomes:					
Federal Funds	.....	.....	.....	.....	.....
Evaluation Tap funding (NA)	(260,986)	(271,564)	271,564	+ 271,564	+ 271,564
Clinical effectiveness research (NA)	(15,000)	(15,000)	(30,000)	(- 260,986)	(- 271,564)
Reducing medical errors (NA)	(84,000)	(93,934)	(78,934)	(+ 15,000)	(+ 15,000)
Subtotal, Program level	(260,986)	(271,564)	(271,564)	(+ 10,578)	(- 15,000)
Medical Expenditures Panel Surveys:					
Federal Funds	.....	.....	.....	.....	.....
Evaluation Tap funding (NA)	(55,300)	(55,300)	55,300	+ 55,300	+ 55,300
Program Support:					
Federal Funds	.....	.....	.....	.....	.....
Evaluation Tap funding (NA)	(2,700)	(2,700)	2,700	+ 2,700	+ 2,700
Total, AHRQ	(318,986)	(329,564)	329,564	+ 329,564	+ 329,564
Evaluation Tap funding (NA)	.....	.....	.....	(- 318,986)	(- 329,564)

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 2007 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL  
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[In thousands of dollars]

Item	2007 comparable	Budget estimate	Committee recommendation	Senate Committee recommendation compared with (+ or -)	
				2007 comparable	Budget estimate
Total, AHRO program level .....	(318,986)	(329,564)	(329,564)	(+ 10,578)	.....
Total, Public Health Service appropriation .....	44,497,020	43,244,104	46,572,409	+ 2,075,389	+ 3,328,305
Total, Public Health Service program level .....	(45,140,219)	(43,695,031)	(46,702,936)	(+ 1,562,717)	(+ 3,007,905)
CENTERS FOR MEDICARE AND MEDICAID SERVICES					
GRANTS TO STATES FOR MEDICAID					
Medicaid current law benefits .....	155,467,869	194,109,000	194,109,000	+ 38,641,131	.....
State and local administration .....	9,881,583	10,014,716	10,014,716	+ 133,133	.....
Vaccines for Children .....	2,905,330	2,761,957	2,761,957	- 143,373	.....
Subtotal, Medicaid program level .....	168,254,782	206,885,673	206,885,673	+ 38,630,891	.....
Less funds advanced in prior year .....	- 62,783,825	- 65,257,617	- 65,257,617	- 2,473,792	.....
Total, Grants to States for Medicaid .....	105,470,957	141,628,056	141,628,056	+ 36,157,099	.....
New advance, 1st quarter .....	65,257,617	67,292,669	67,292,669	+ 2,035,052	.....
PAYMENTS TO HEALTH CARE TRUST FUNDS					
Supplemental medical insurance .....	137,623,000	140,704,000	140,704,000	+ 3,081,000	.....
Hospital insurance for the uninsured .....	239,000	269,000	269,000	+ 30,000	.....
Federal uninsured payment .....	229,000	237,000	237,000	+ 8,000	.....
Program management .....	175,000	192,000	192,000	+ 17,000	.....
General revenue for Part D benefit .....	37,329,000	46,299,000	46,299,000	+ 8,970,000	.....
General revenue for Part D administration .....	703,480	744,000	744,000	+ 40,520	.....
HCFA reimbursement .....	.....	183,000	383,000	+ 383,000	+ 200,000
Prescription drug eligibility determinations .....	.....	.....	.....	.....	.....
Subtotal, Payments to Trust Funds, current law .....	176,298,480	188,628,000	188,628,000	+ 12,529,520	+ 200,000
Less funds advanced in prior year .....	.....	.....	.....	.....	.....

	176,298,480	188,628,000	188,828,000	+12,529,520	+200,000
New Advance fiscal year 2009					
Total, Payments to Trust Funds, current law		188,628,000	188,828,000	+12,529,520	+200,000
PROGRAM MANAGEMENT <sup>8</sup>					
Research, Demonstration, Evaluation	57,420	33,700	35,325	-22,095	+1,625
Medicare Operations <sup>9</sup>	2,159,242	2,303,615	2,276,052	+116,810	-27,563
Revitalization plan	23,963			-23,963	
State Survey and Certification	258,128	293,524	293,524	+35,396	
Federal Administration <sup>9</sup>	642,354	643,187	643,187	+833	
Total, Program management, Limitation on new BA	3,141,107	3,274,026	3,248,088	+106,981	-25,938
Survey and Certification user fee		(-35,000)	(-35,000)	(-35,000)	
Total, Program management, program level	(3,141,107)	(3,239,026)	(3,213,088)	(+71,981)	(-25,938)
HEALTH CARE FRAUD AND ABUSE CONTROL					
Part D drug benefit/medicare advantage (MIP)		137,840	288,480	+288,480	+150,640
HHS Office of Inspector General		17,530	36,690	+36,690	+19,160
Department of Justice		17,530	36,690	+36,690	+19,160
Medicaid and SCHIP financial management		10,100	21,140	+21,140	+11,040
Total, Health Care Fraud and Abuse Control		183,000	383,000	+383,000	+200,000
Total, Center for Medicare and Medicaid Services	350,168,161	401,005,751	401,379,813	+51,211,652	+374,062
Federal funds	347,027,054	397,548,725	397,748,725	+50,721,671	+200,000
Current year	(281,769,437)	(330,256,056)	(330,456,056)	(+48,686,619)	(+200,000)
New advance, fiscal year 2009	(65,257,617)	(67,292,669)	(67,292,669)	(+2,035,052)	
Trust Funds	3,141,107	3,457,026	3,631,088	+489,981	+174,062
ADMINISTRATION FOR CHILDREN AND FAMILIES					
FAMILY SUPPORT PAYMENTS TO STATES					
Payments to territories	38,000	38,000	38,000		
Repatriation	1,000	1,000	1,000		
Subtotal, Welfare payments	39,000	39,000	39,000		
Child Support Enforcement:					
State and local administration	3,943,678	3,417,713	3,417,713	-525,965	
Federal incentive payments	471,000	483,000	483,000	+12,000	

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 2007 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL  
FOR FISCAL YEAR 2008—Continued

[In thousands of dollars]

Item	2007 comparable	Budget estimate	Committee recommendation	Senate Committee recommendation compared with (+ or -)	
				2007 comparable	Budget estimate
Access and visitation .....	10,000	10,000	10,000		
Subtotal, Child Support Enforcement .....	4,424,678	3,910,713	3,910,713	-513,965	
Total, Family support payments program level .....	4,463,678	3,949,713	3,949,713	-513,965	
Less funds advanced in previous years .....	-1,200,000	-1,000,000	-1,000,000	+200,000	
Total, Family support payments, current year .....	3,263,678	2,949,713	2,949,713	-313,965	
New advance, 1st quarter, fiscal year 2009 .....	1,000,000	1,000,000	1,000,000		
LOW INCOME HOME ENERGY ASSISTANCE PROGRAM (LIEAP)					
Formula grants .....	1,980,000	1,500,000	1,980,000		+480,000
Subtotal, Formula grants .....	1,980,000	1,500,000	1,980,000		+480,000
Contingency fund .....	181,170	282,000	181,170		-100,830
Subtotal, Contingency fund .....	181,170	282,000	181,170		-100,830
Total, LIEAP .....	2,161,170	1,782,000	2,161,170		+379,170
Total, LIEAP, program level .....	2,161,170	1,782,000	2,161,170		+379,170
REFUGEE AND ENTRANT ASSISTANCE					
Transitional and Medical Services .....	265,546	294,021	294,021	+28,475	
Victims of Trafficking .....	9,823	14,816	9,823		-4,993
Social Services .....	154,005	149,610	154,005		+4,395
Preventive Health .....	4,748	4,700	4,748		+48
Targeted Assistance .....	48,590	48,104	48,590		+486
Unaccompanied minors .....	95,318	134,662	133,162	+37,844	-1,500

	9,817	9,717	9,817	9,717	+ 100
Victims of Torture .....					
Total, Refugee and entrant assistance .....	587,847	655,630	654,166	654,166	-1,464
CHILD CARE AND DEVELOPMENT BLOCK GRANT .....	2,062,081	2,062,081	2,062,081	2,062,081	
SOCIAL SERVICES BLOCK GRANT (TITLE XX) .....	1,700,000	1,700,000	1,700,000	1,700,000	
CHILDREN AND FAMILIES SERVICES PROGRAMS					
Programs for Children, Youth and Families:					
Head Start, current funded .....	5,499,771	5,399,771	5,699,771	5,699,771	+ 300,000
Advance from prior year .....	(1,388,800)	(1,388,800)	(1,388,800)	(1,388,800)	
Fiscal Year 2009 .....	1,388,800	1,388,800	1,388,800	1,388,800	
Subtotal, Head Start, program level .....	6,888,571	6,788,571	7,088,571	7,088,571	+ 300,000
Consolidated Runaway, Homeless Youth Program .....	87,837	87,837	102,837	102,837	+ 15,000
Prevention grants to reduce abuse of runaway youth .....	15,027	15,027	20,027	20,027	+ 5,000
Child Abuse State Grants .....	27,007	27,007	27,007	27,007	
Child Abuse Discretionary Activities .....	25,780	36,138	37,738	37,738	+ 1,600
Community based child abuse prevention .....	42,430	42,430	42,430	42,430	
Abandoned Infants Assistance .....	11,835	11,835	11,835	11,835	
Child Welfare Services .....	286,754	286,754	286,754	286,754	
Child Welfare Training .....	7,335	7,335	7,335	7,335	
Adoption Opportunities .....	26,848	26,848	26,848	26,848	
Adoption Incentive .....	5,000	13,500	9,500	9,500	-4,000
Adoption Awareness .....	12,674	12,674	12,674	12,674	
Interstate Home Study for Adoption and Foster Care .....		10,000		10,000	-10,000
Compassion Capital Fund .....	64,350	75,000	53,625	53,625	-21,375
Social Services and Income Maintenance Research .....	5,868		5,825	5,825	+ 5,825
Evaluation tap funding .....	(6,000)	(5,880)	(6,000)	(6,000)	(+ 120)
Subtotal, Program level .....	(11,868)	(5,880)	(11,825)	(11,825)	(+ 5,945)
Developmental Disabilities Programs:					
State Councils .....	71,771	71,771	77,271	77,271	+ 5,500
Protection and Advocacy .....	38,718	38,718	42,718	42,718	+ 4,000
Voting access for individuals with disabilities .....	15,720	15,720	16,720	16,720	+ 1,000
Developmental Disabilities Projects of National Significance .....	11,414	11,414	15,414	15,414	+ 4,000
University Centers for Excellence in Developmental Disabilities .....	33,212	33,213	38,713	38,713	+ 5,501
Subtotal, Developmental disabilities programs .....	170,835	170,836	190,836	190,836	+ 20,000

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 2007 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL  
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Item	2007 comparable	Budget estimate	Committee recommendation	Senate Committee recommendation compared with (+ or -)	
				2007 comparable	Budget estimate
Native American Programs .....	44,332	44,332	49,332	+ 5,000	+ 5,000
Community Services:					
Grants to States for Community Services .....	630,425	.....	670,425	+ 40,000	+ 670,425
Community Initiative Program:					
Economic Development .....	27,022	.....	27,022	.....	+ 27,022
Job Opportunities for Low-Income Individuals .....	5,382	.....	5,382	.....	+ 5,382
Individual Development Account Initiative .....	24,452	24,452	24,452	.....	.....
Rural Community Facilities .....	7,293	.....	8,000	+ 707	+ 8,000
Subtotal, Community Initiative Program .....	64,149	24,452	64,856	+ 707	+ 40,404
Subtotal, Community Services .....	694,574	24,452	735,281	+ 40,707	+ 710,829
Domestic Violence Hotline .....	2,970	2,970	3,200	+ 230	+ 230
Family Violence/Battered Women's Shelters .....	124,731	124,731	127,000	+ 2,269	+ 2,269
Mentoring Children of Prisoners .....	49,493	50,000	49,493	.....	- 507
Independent Living Training Vouchers .....	46,157	46,157	46,157	.....	.....
Abstinence Education .....	108,900	136,664	80,416	- 28,484	- 56,248
Evaluation Tap Funding .....	(4,500)	(4,500)	(4,500)	.....	.....
Subtotal, Program level .....	(113,400)	(141,164)	(84,916)	(- 28,484)	(- 56,248)
Faith-Based Center .....	1,386	1,386	1,386	.....	.....
Program Direction .....	187,776	197,225	197,225	+ 9,449	.....
Total, Children and Families Services Programs .....	8,938,470	8,239,709	9,213,332	+ 274,862	+ 973,623
Current Year .....	(7,549,670)	(6,850,909)	(7,824,532)	(+ 274,862)	(+ 973,623)
Fiscal Year 2009 .....	(1,388,800)	(1,388,800)	(1,388,800)	.....	.....
Evaluation Tap funding .....	(10,500)	(10,380)	(10,500)	.....	(+ 120)

Total, Program level .....	8,948,970	8,250,089	9,223,832	+ 274,862	+ 973,743
<b>PROMOTING SAFE AND STABLE FAMILIES <sup>10</sup></b>	345,000	345,000	345,000	.....	.....
Discretionary Funds .....	89,100	89,100	89,100	.....	.....
<b>PAYMENTS TO STATES FOR FOSTER CARE AND ADOPTION</b>					
Foster Care .....	4,475,000	4,581,000	4,581,000	+ 106,000	.....
Adoption Assistance .....	2,027,000	2,156,000	2,156,000	+ 129,000	.....
Independent living .....	140,000	140,000	140,000	.....	.....
Total, Payments to States .....	6,642,000	6,877,000	6,877,000	+ 235,000	.....
Less Advances from Prior Year .....	—	-1,810,000	-1,810,000	- 80,000	.....
Total, payments, current year .....	4,912,000	5,067,000	5,067,000	+ 155,000	.....
New Advance, 1st quarter .....	1,810,000	1,776,000	1,776,000	- 34,000	.....
Total, Administration for Children & Families .....	26,869,346	25,666,233	27,017,562	+ 148,216	+ 1,351,329
Current year .....	(22,670,346)	(21,501,433)	(22,852,762)	(+ 182,216)	(+ 1,351,329)
Fiscal year 2009 .....	(4,198,800)	(4,164,800)	(4,164,800)	(- 34,000)	.....
Evaluation Tap funding .....	(10,500)	(10,380)	(10,500)	.....	(+ 120)
Total, Administration for Children & Families .....	26,879,846	25,676,613	27,028,062	+ 148,216	+ 1,351,449
<b>ADMINISTRATION ON AGING</b>					
Grants to States:					
Supportive Services and Centers .....	350,595	350,595	350,595	.....	.....
Preventive Health .....	21,400	.....	21,400	.....	+ 21,400
Protection of Vulnerable Older Americans—Title VII .....	20,156	19,166	21,156	+ 1,000	+ 1,990
Family Caregivers .....	156,167	154,187	156,167	.....	+ 1,980
Native American Caregivers Support .....	6,241	6,241	6,428	+ 187	+ 187
Subtotal, Caregivers .....	162,408	160,428	162,595	+ 187	+ 2,167
Nutrition:					
Congregate Meals .....	398,919	383,401	418,519	+ 19,600	+ 35,118
Home Delivered Meals .....	188,305	180,998	197,805	+ 9,500	+ 16,807
Nutrition Services Incentive Program .....	147,846	147,110	157,246	+ 9,400	+ 10,136
Subtotal, Nutrition .....	735,070	711,509	773,570	+ 38,500	+ 62,061
Subtotal, Grants to States .....	1,289,629	1,241,698	1,329,316	+ 39,687	+ 87,618

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Item	2007 comparable	Budget estimate	Committee recommendation	Senate Committee recommendation compared with (+ or -)	
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Grants for Native Americans .....	26,134	26,134	27,834	+ 1,700	+ 1,700
Program Innovations .....	24,058	35,485	11,420	- 12,638	- 24,065
Aging Network Support Activities .....	13,133	13,133	42,651	+ 29,518	+ 29,518
Alzheimer's Disease Demonstrations .....	11,668	.....	11,668	.....	+ 11,668
Program Administration .....	18,385	18,696	18,696	+ 311	.....
Total, Administration on Aging .....	1,383,007	1,335,146	1,441,585	+ 58,578	+ 106,439
OFFICE OF THE SECRETARY					
GENERAL DEPARTMENTAL MANAGEMENT:					
Federal Funds .....	178,674	225,442	227,403	+ 48,729	+ 1,961
Trust Funds .....	5,793	5,851	5,851	+ 58	.....
Subtotal .....	184,467	231,293	233,254	+ 48,787	+ 1,961
Adolescent Family Life (Title XX) .....	30,307	30,307	30,307	.....	.....
Minority health .....	53,455	43,775	49,475	- 3,980	+ 5,700
Office of Women's Health .....	28,246	27,369	30,369	+ 2,123	+ 3,000
Minority HIV/AIDS .....	51,891	51,891	51,891	.....	.....
Afghanistan .....	5,892	5,941	5,941	+ 49	.....
Embryo adoption awareness campaign .....	1,980	1,980	4,000	+ 2,020	+ 2,020
Evaluation tap funding (ASPE) (NA) .....	(39,552)	(46,756)	(46,756)	(+ 7,204)	.....
Total, General Departmental Management .....	356,238	392,556	405,237	+ 48,999	+ 12,681
Federal Funds .....	350,445	386,705	399,386	+ 48,941	+ 12,681
Trust Funds .....	5,793	5,851	5,851	+ 58	.....
Evaluation tap funding .....	(39,552)	(46,756)	(46,756)	(+ 7,204)	.....
OFFICE OF MEDICARE HEARINGS AND APPEALS .....	59,727	70,000	70,000	+ 10,273	.....
OFFICE OF THE NATIONAL COORDINATOR FOR HEALTH INFORMATION TECHNOLOGY <sup>11</sup> .....	42,402	89,872	43,000	+ 598	- 46,872

	(18,900)	(28,000)	(28,000)	(+ 9,100)	
Evaluation tap funding .....					.....
Total, Health Information Tech. program level .....	(61,302)	(117,872)	(71,000)	(+ 9,698)	( - 46,872)
OFFICE OF THE INSPECTOR GENERAL:					
Federal Funds .....	39,808	44,687	45,687	+ 5,879	+ 1,000
HIPAA funding (NA) .....	(175,570)	(196,418)	(196,418)	(+ 20,848)	.....
Medicaid integrity program: Deficit Reduction Act (Public Law 109-171) (NA) .....	.....	(25,000)	(25,000)	(+ 25,000)	.....
Total, Inspector General program level .....	(215,378)	(266,105)	(267,105)	(+ 51,727)	(+ 1,000)
OFFICE FOR CIVIL RIGHTS:					
Federal Funds .....	31,628	33,748	33,748	+ 2,120	.....
Trust Funds .....	3,281	3,314	3,314	+ 33	.....
Total, Office for Civil Rights .....	34,909	37,062	37,062	+ 2,153	.....
MEDICAL BENEFITS FOR COMMISSIONED OFFICERS:					
Retirement payments .....	292,249	317,967	317,967	+ 25,718	.....
Survivors benefits .....	17,338	18,026	18,026	+ 688	.....
Dependents' medical care .....	61,111	66,549	66,549	+ 5,438	.....
Total, Medical benefits for Commissioned Officers .....	370,698	402,542	402,542	+ 31,844	.....
PUBLIC HEALTH AND SOCIAL SERVICE EMERGENCY FUND					
HRSA homeland security activities <sup>7</sup> .....	.....	.....	.....	.....	.....
CDC homeland security activities <sup>7</sup> .....	.....	.....	.....	.....	.....
NIH homeland security activities <sup>7</sup> .....	.....	.....	.....	.....	.....
Office of the Secretary homeland security activities .....	717,320	780,646	756,556	+ 39,236	- 24,090
Other PHSSEF homeland security activities .....	.....	25,000	55,000	+ 55,000	+ 30,000
Pandemic influenza preparedness .....	.....	948,091	888,000	+ 888,000	- 60,091
Total, PHSSEF .....	717,320	1,753,737	1,699,556	+ 982,236	- 54,181
Total, Office of the Secretary .....	1,621,102	2,790,456	2,703,084	+ 1,081,982	- 87,372
Federal Funds .....	1,552,301	2,711,291	2,623,919	+ 1,071,618	- 87,372
Trust Funds .....	68,801	79,165	79,165	+ 10,364	.....
Total, Title II, Dept of Health & Human Services .....	424,538,636	474,041,690	479,114,453	+ 54,575,817	+ 5,072,763
Federal Funds .....	421,328,728	470,505,499	475,404,200	+ 54,075,472	+ 4,898,701
Current year .....	(351,872,311)	(399,048,030)	(403,946,731)	(+ 52,074,420)	(+ 4,898,701)

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 2007 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL  
FOR FISCAL YEAR 2008—Continued  
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Item	2007 comparable	Budget estimate	Committee recommendation	Senate Committee recommendation compared with (+ or -)	
				2007 comparable	Budget estimate
Fiscal year 2009	(69,456,417)	(71,457,469)	(71,457,469)	(+ 2,001,052)	.....
Trust Funds	3,209,908	3,536,191	3,710,253	+ 500,345	+ 174,062
TITLE III—DEPARTMENT OF EDUCATION EDUCATION FOR THE DISADVANTAGED					
Grants to Local Educational Agencies (LEAs):					
Basic Grants:					
Advance from prior year	(1,478,584)	(1,353,584)	(1,353,584)	(- 125,000)	.....
Forward funded	5,451,387	5,325,824	5,038,599	- 412,788	- 287,225
Current funded	3,437	4,000	4,000	+ 563	.....
Subtotal, Basic grants current year approp	5,454,824	5,329,824	5,042,599	- 412,225	- 287,225
Subtotal, Basic grants total funds available	(6,933,408)	(6,683,408)	(6,396,183)	(- 537,225)	(- 287,225)
Basic Grants Fiscal Year 2009 Advance	1,353,584	1,478,584	1,765,808	+ 412,224	+ 287,224
Subtotal, Basic grants, program level	6,808,408	6,808,408	6,808,407	- 1	- 1
Concentration Grants:					
Advance from prior year	(1,365,031)	(1,365,031)	(1,365,031)	.....	.....
Fiscal Year 2009 Advance	1,365,031	1,365,031	1,365,031	.....	.....
Subtotal, Concentration Grants program level	1,365,031	1,365,031	1,365,031	.....	.....
Targeted Grants:					
Current funded	.....	1,196,775	.....	.....	- 1,196,775
Advance from prior year	(2,269,843)	(2,332,343)	(2,332,343)	(+ 62,500)	.....
Fiscal Year 2009 Advance	2,332,343	2,269,843	2,868,231	+ 535,888	+ 598,388
Subtotal, Targeted Grants program level	2,332,343	3,466,618	2,868,231	+ 535,888	- 598,387

Education Finance Incentive Grants:	(2,269,843)	(2,332,343)	(2,332,343)	(+ 62,500)	.....
Advance from prior year .....	2,332,343	2,269,843	2,868,231	+535,888	+ 598,388
Fiscal Year 2009 Advance .....					
Subtotal, Education Finance Incentive Grants .....	2,332,343	2,269,843	2,868,231	+ 535,888	+ 598,388
Subtotal, Grants to LEAs, program level .....	12,838,125	13,909,900	13,909,900	+ 1,071,775	.....
Even Start .....	82,283	.....	.....	- 82,283	.....
School improvement grants .....	125,000	500,000	500,000	+ 375,000	.....
Reading First:					
State Grants (forward funded) .....	1,029,234	1,018,692	800,000	- 229,234	- 218,692
Early Reading First .....	117,666	117,666	117,666	.....	.....
Striving readers 12 .....	31,870	100,000	36,000	+ 4,130	- 64,000
Math Now for elementary school students .....	.....	125,000	.....	.....	- 125,000
Math Now for middle school students .....	.....	125,000	23,000	+ 3,515	+ 3,514
Literacy through School Libraries .....	19,486	19,486	.....	.....	- 250,000
Promise scholarships .....	.....	250,000	.....	.....	- 50,000
America's opportunity scholarships for kids .....	.....	50,000	.....	.....	.....
State Agency Programs:					
Migrant .....	386,524	380,295	386,524	.....	+ 6,229
Neglected and Delinquent/High Risk Youth .....	49,797	49,797	49,797	.....	.....
Subtotal, State Agency programs .....	436,321	430,092	436,321	.....	+ 6,229
Evaluation .....	9,330	9,327	9,330	.....	+ 3
Comprehensive School Reform Demonstration .....	2,352	.....	1,634	- 718	+ 1,634
Migrant Education:					
High School Equivalency Program .....	18,550	18,550	18,550	.....	.....
College Assistance Migrant Program .....	15,377	15,377	15,377	.....	.....
Subtotal, Migrant Education .....	33,927	33,927	33,927	.....	.....
Total, Education for the disadvantaged .....	14,725,593	16,689,090	15,867,778	+ 1,142,185	- 821,312
Current Year .....	(7,342,292)	(9,305,789)	(7,000,477)	(- 341,815)	(- 2,305,312)
Fiscal Year 2009 .....	(7,383,301)	(7,383,301)	(8,867,301)	(+ 1,484,000)	(+ 1,484,000)
Subtotal, forward funded .....	(7,158,447)	(8,571,383)	(6,812,554)	(- 345,893)	(- 1,758,829)
Basic Support Payments .....	1,091,867	1,091,867	1,111,867	+ 20,000	+ 20,000
IMPACT AID .....					

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 2007 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL  
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Item	2007 comparable	Budget estimate	Committee recommendation	Senate Committee recommendation compared with (+ or -)	
				2007 comparable	Budget estimate
Payments for Children with Disabilities .....	49,466	49,466	49,466		
Facilities Maintenance (Sec. 8008) .....	4,950	4,957	4,950		+ 353
Construction (Sec. 8007) .....	17,820	17,820	17,820		
Payments for Federal Property (Sec. 8002) .....	64,350	64,350	64,350		
Total, Impact aid .....	1,228,453	1,228,100	1,248,453	+ 20,000	+ 20,353
SCHOOL IMPROVEMENT PROGRAMS					
State Grants for Improving Teacher Quality .....	1,452,439	1,352,488	1,452,439		+ 99,951
Advance from prior year .....	(1,435,000)	(1,435,000)	(1,435,000)		
Fiscal Year 2009 .....	1,435,000	1,435,000	1,435,000		
Subtotal, State Grants for Improving Teacher Quality, program level .....	(2,887,439)	(2,787,488)	(2,887,439)		(+ 99,951)
Early Childhood Educator Professional Development .....	14,550		14,550		+ 14,550
Mathematics and Science Partnerships .....	182,160	182,124	184,000	+ 1,840	+ 1,876
State Grants for Innovative Education (Education Block Grant) .....	99,000			- 99,000	
Educational Technology State Grants .....	272,250		272,250		+ 272,250
Supplemental Education Grants .....	18,001	18,001	18,001		
21st Century Community Learning Centers .....	981,166	981,180	1,000,000	+ 18,834	+ 18,820
State Assessments/Enhanced Assessment Instruments .....	407,563	411,630	416,000	+ 8,437	+ 4,370
Javits gifted and talented education .....	7,596		7,596		+ 7,596
Foreign language assistance .....	23,780	23,755	26,780	+ 3,000	+ 3,025
Education for Homeless Children and Youth .....	61,871	61,878	66,878	+ 5,007	+ 5,000
Training and Advisory Services (Civil Rights) .....	7,113	7,113	7,113		
Education for Native Hawaiians .....	33,907		34,500	+ 593	+ 34,500
Alaska Native Education Equity .....	33,907		34,500	+ 593	+ 34,500
Rural Education .....	168,918	168,851	168,918		+ 67
Comprehensive Centers .....	56,257	56,256	60,000	+ 3,743	+ 3,744
Total, School improvement programs .....	5,255,478	4,698,276	5,198,525	- 56,953	+ 500,249

Current Year .....	(3,820,478)	(3,263,276)	(3,763,525)	(- 56,953)	(+ 500,249)
Fiscal Year 2009 .....	(1,435,000)	(1,435,000)	(1,435,000)	.....	.....
Subtotal, forward funded .....	(3,625,367)	(3,158,151)	(3,560,485)	(- 64,882)	(+ 402,334)
INDIAN EDUCATION					
Grants to Local Educational Agencies .....	95,331	95,331	95,331	.....	.....
Federal Programs:					
Special Programs for Indian Children .....	19,399	19,399	19,399	.....	.....
National Activities .....	3,960	3,953	3,960	.....	+7
Subtotal, Federal Programs .....	23,359	23,352	23,359	.....	+7
Total, Indian Education .....	118,690	118,683	118,690	.....	+7
INNOVATION AND IMPROVEMENT					
Troops-to-Teachers .....	14,645	14,645	14,645	.....	.....
Transition to Teaching .....	44,484	44,482	44,484	.....	+2
National Writing Project .....	21,532	.....	24,000	+ 2,468	+ 24,000
Teaching of Traditional American History .....	119,790	50,000	120,000	+ 210	+ 70,000
School Leadership .....	14,731	.....	14,731	.....	+ 14,731
Advanced Credentialing .....	16,695	.....	9,821	- 6,874	+ 9,821
Adjunct Teacher Corps .....	.....	25,000	.....	.....	- 25,000
Charter Schools Grants .....	214,782	214,782	214,783	+ 1	+ 1
Credit Enhancement for Charter School Facilities .....	36,611	36,611	.....	- 36,611	- 36,611
Voluntary Public School Choice .....	26,278	26,275	26,278	.....	+ 3
Magnet Schools Assistance .....	106,693	106,685	106,693	.....	+ 8
Fund for the Improvement of Education (FIE) .....	158,510	58,108	218,699	+ 60,189	+ 160,591
Teacher Incentive Fund, Current funded .....	200	199,000	99,000	+ 98,800	- 100,000
Teacher Incentive Fund, Forward funded .....	.....	.....	.....	.....	.....
Ready-to-Learn television .....	24,255	24,255	25,255	+ 1,000	+ 1,000
Close Up Fellowships .....	1,454	.....	2,900	+ 1,046	+ 2,500
Advanced Placement .....	37,026	122,175	42,000	+ 4,974	- 80,175
Total, Innovation and Improvement .....	837,686	922,018	962,889	+ 125,203	+ 40,871
Subtotal, Forward funded .....	.....	.....	.....	.....	.....
SAFE SCHOOLS AND CITIZENSHIP EDUCATION					
Safe and Drug Free Schools and Communities: State Grants, forward funded .....	346,500	100,000	300,000	- 46,500	+ 200,000
National Programs .....	141,112	224,248	139,112	- 2,000	- 85,136
Alcohol Abuse Reduction .....	32,409	.....	33,000	+ 591	+ 33,000

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[In thousands of dollars]

Item	2007 comparable	Budget estimate	Committee recommendation	Senate Committee recommendation compared with (+ or -)	
				2007 comparable	Budget estimate
Mentoring Programs .....	48,814	.....	50,000	+ 1,186	+ 50,000
Character education .....	24,248	.....	25,000	+ 752	+ 25,000
Elementary and Secondary School Counseling .....	34,650	.....	40,000	+ 5,350	+ 40,000
Carol M. White Physical Education Program .....	72,674	.....	80,000	+ 7,326	+ 80,000
Civic Education .....	29,111	.....	30,000	+ 889	+ 30,000
Total, Safe Schools and Citizenship Education .....	729,518	324,248	697,112	- 32,406	+ 372,864
Current Year .....	(729,518)	(324,248)	(697,112)	(- 32,406)	(+ 372,864)
Subtotal, Forward funded .....	(346,500)	(100,000)	(300,000)	(- 46,500)	(+ 200,000)
ENGLISH LANGUAGE ACQUISITION					
Current funded .....	43,486	43,603	43,603	+ 117	.....
Forward funded .....	625,522	627,216	627,216	+ 1,694	.....
Total, English Language Acquisition .....	669,008	670,819	670,819	+ 1,811	.....
SPECIAL EDUCATION					
State Grants:					
Grants to States Part B current year .....	5,358,761	4,276,741	5,315,800	- 42,961	+ 1,039,059
Part B advance from prior year .....	(5,424,200)	(5,424,200)	(5,424,200)	.....	.....
Grants to States Part B (Fiscal Year 2009) .....	5,424,200	6,215,200	5,924,200	+ 500,000	- 291,000
Subtotal, Grants to States, program level .....	10,782,961	10,491,941	11,240,000	+ 457,039	+ 748,059
Preschool Grants .....	380,751	380,751	380,751	.....	.....
Grants for Infants and Families .....	436,400	423,067	450,000	+ 13,600	+ 26,933
Subtotal, State grants, program level .....	11,600,112	11,295,759	12,070,751	+ 470,639	+ 774,992
IDEA National Activities:					
State Personnel Development .....	.....	.....	46,000	+ 46,000	+ 46,000
Technical Assistance and Dissemination .....	48,903	48,902	48,903	.....	+ 1

Personnel Preparation .....	89,720	89,719	89,720	89,720	.....	+ 1
Parent Information Centers .....	25,704	25,704	27,000	27,000	+ 1,296	+1,296
Technology and Media Services .....	38,428	25,063	40,000	40,000	+ 1,572	+ 14,937
Subtotal, IDEA special programs .....	202,755	189,388	251,623	251,623	+ 48,868	+ 62,235
Special Olympics Education Programs .....	.....	.....	8,000	8,000	+ 8,000	+ 8,000
Total, Special education .....	11,802,867	11,485,147	12,330,374	12,330,374	+ 527,507	+ 845,227
Current Year .....	(6,378,667)	(5,269,947)	(6,406,174)	(6,406,174)	(+ 27,507)	(+ 1,136,227)
Fiscal Year 2009 .....	(5,424,200)	(6,215,200)	(5,924,200)	(5,924,200)	(+ 500,000)	(- 291,000)
Subtotal, Forward funded .....	(6,175,912)	(5,080,559)	(6,192,551)	(6,192,551)	(+ 16,639)	(+ 1,111,992)
<b>REHABILITATION SERVICES AND DISABILITY RESEARCH</b>						
Vocational Rehabilitation State Grants .....	2,837,160	2,874,043	2,874,043	2,874,043	+ 36,883	.....
Client Assistance State grants .....	11,782	11,782	11,782	11,782	.....	.....
Training .....	38,438	38,438	38,438	38,438	.....	.....
Demonstration and training programs .....	6,511	6,840	10,490	10,490	+ 3,979	+ 3,650
Migrant and seasonal farmworkers .....	2,279	.....	2,279	2,279	.....	+ 2,279
Recreational programs .....	2,518	.....	2,518	2,518	.....	+ 2,518
Protection and advocacy of individual rights (PAIR) .....	16,489	16,489	17,489	17,489	+ 1,000	+ 1,000
Projects with industry .....	19,538	.....	19,538	19,538	.....	+ 19,538
Supported employment State grants .....	29,700	.....	29,700	29,700	.....	+ 29,700
Independent living:	.....	.....	.....	.....	.....	.....
State grants .....	22,588	22,588	22,588	22,588	.....	.....
Centers .....	74,638	74,638	74,638	74,638	.....	.....
Services for older blind individuals .....	32,895	32,895	32,895	32,895	.....	.....
Subtotal, Independent living .....	130,121	130,121	130,121	130,121	.....	.....
Program Improvement .....	835	633	633	633	- 202	.....
Evaluation .....	1,473	1,973	1,695	1,695	+ 222	- 278
Helen Keller National Center for Deaf/Blind Youth and Adults .....	8,511	8,011	9,511	9,511	+ 1,000	+ 1,500
National Inst. Disability and Rehab. Research (NIDRR) .....	106,705	106,705	106,705	106,705	.....	.....
Assistive Technology .....	30,452	26,111	32,000	32,000	+ 1,548	+ 5,889
Subtotal, discretionary programs .....	405,352	347,103	412,899	412,899	+ 7,547	+ 65,796
Total, Rehabilitation services .....	3,242,512	3,221,146	3,286,942	3,286,942	+ 44,430	+ 65,796

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				2007 comparable	Budget estimate
SPECIAL INSTITUTIONS FOR PERSONS WITH DISABILITIES					
AMERICAN PRINTING HOUSE FOR THE BLIND .....	17,573	17,573	22,000	+ 4,427	+ 4,427
NATIONAL TECHNICAL INSTITUTE FOR THE DEAF (NTID):					
Operations .....	56,141	55,349	57,295	+ 1,154	+ 1,946
Construction .....		913	1,705	+ 1,705	+ 792
Total, NTID .....	56,141	56,262	59,000	+ 2,859	+ 2,738
GALLAUDET UNIVERSITY:					
Operations .....	106,998	106,398	110,400	+ 3,402	+ 4,002
Evaluation .....		600	600	+ 600	
Total, Gallaudet .....	106,998	106,998	111,000	+ 4,002	+ 4,002
Total, Special Institutions for Persons with Disabilities .....	180,712	180,833	192,000	+ 11,288	+ 11,167
CAREER, TECHNICAL AND ADULT EDUCATION					
Career and Technical:					
State Grants, current funded .....	390,553	600,000	390,553		- 209,447
Advance from prior year .....	(791,000)	(791,000)	(791,000)		
Fiscal Year 2009 .....	791,000		791,000		+ 791,000
Subtotal, State Grants, program level .....	1,181,553	600,000	1,181,553		+ 581,553
Tech-Prep Education State Grants .....	104,753		104,753		+ 104,753
National Programs .....	10,000	10,000	8,000	- 2,000	- 2,000
Subtotal, Career and Technical Education .....	1,296,306	610,000	1,294,306	- 2,000	+ 684,306
Adult Education:					
State Grants/Adult basic and literacy education State Grants, current funded .....	563,975	564,074	564,074	+ 99	

National Programs:									
National Leadership Activities .....	9,005	9,096	7,000	-2,005	-2,096				
National Institute for Literacy .....	6,583	6,638	6,638	+55					
Subtotal, National programs .....	15,588	15,734	13,638	-1,950	-2,096				
Subtotal, Adult education .....	579,563	579,808	577,712	-1,851	-2,096				
Smaller Learning Communities, current funded .....	4,677			-4,677					
Smaller Learning Communities, forward funded .....	88,854			-88,854					
State Grants for Incarcerated Youth Offenders .....	22,770		22,770		+22,770				
Total, Career, Technical and adult education .....	1,992,170	1,189,808	1,894,788	-97,382	+704,980				
Current Year .....	(1,201,170)	(1,189,808)	(1,103,788)	(-97,382)	(-86,020)				
Fiscal Year 2009 .....	(791,000)		(791,000)		(+791,000)				
Subtotal, forward funded .....	(1,196,493)	(1,189,808)	(1,103,788)	(-92,705)	(-86,020)				
STUDENT FINANCIAL ASSISTANCE									
Pell Grants—maximum grant (NA) .....	(4,310)	(4,050)	(4,310)		(+260)				
Pell Grants .....	13,660,711	13,414,000	14,487,000	+826,289	+1,073,000				
Federal Supplemental Educational Opportunity Grants .....	770,933		770,933		+770,933				
Federal Work Study .....	980,354	980,492	980,492	+138					
Federal Perkins loan cancellations .....	65,471		65,471		+65,471				
LEAP program .....	64,987		64,987		+64,987				
Total, Student Financial Assistance .....	15,542,456	14,394,492	16,368,883	+826,427	+1,974,391				
STUDENT AID ADMINISTRATION .....	717,950	708,216	708,216	-9,734					
HIGHER EDUCATION									
Aid for Institutional Development:									
Strengthening Institutions .....	79,535	79,535	79,535						
Hispanic Serving Institutions .....	94,914	94,911	94,914		+3				
Strengthening Historically Black Colleges (HBCUs) .....	238,095	238,095	238,095						
Strengthening Historically Black Graduate Institutions .....	57,915	57,915	57,915						
Strengthening Alaska Native and Native Hawaiian-Serving Institutions .....	11,785		12,500	+715	+12,500				
Strengthening Tribal Colleges .....	23,570	18,570	24,475	+905	+5,905				
Subtotal, Aid for Institutional development .....	505,814	489,026	507,434	+1,620	+18,408				
International Education and Foreign Language:									
Domestic Programs .....	91,541	91,541	91,541						

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Overseas Programs .....	12,610	12,610	12,610		
Institute for International Public Policy .....	1,600	1,600	1,600		
Subtotal, International Education & Foreign Lang .....	105,751	105,751	105,751		
Fund for the Improvement of Postsec. Ed. (FIPSE) .....	21,989	21,988	81,844	+ 59,855	+ 59,856
Minority Science and Engineering Improvement .....	8,730	8,730	8,730		
Tribally Controlled Postsec Vocational and Technical Institutions <sup>1,3</sup> .....	7,366	7,366	8,000	+ 634	+ 634
Federal TRIO Programs .....	828,178	828,178	858,178	+ 30,000	+ 30,000
GEAR UP .....	303,423	303,423	313,423	+ 10,000	+ 10,000
Byrd Honors Scholarships .....	40,590	41,000	41,000	+ 410	+ 41,000
Javits Fellowships .....	9,699	9,797	9,699		- 98
Graduate Assistance in Areas of National Need .....	30,067	30,064	30,067		+ 3
Teacher Quality Enhancement Grants .....	59,895	28,521	28,521	- 31,374	+ 28,521
Child Care Access Means Parents in School .....	15,810	15,810	15,810		
Advancing America thru foreign language partnerships .....	24,000	24,000	12,000	+ 12,000	- 12,000
Demonstration in Disabilities/Higher Education .....	6,875	6,875	6,875		+ 6,875
Underground Railroad Program .....	1,980	970	970	- 1,980	
GPRA data/HEA program evaluation .....	970	970	970		- 970
B.J. Stupak Olympic Scholarships .....	970	970	970		
Thurgood Marshall legal education opportunity program .....	2,946	2,946	2,946		- 2,946
Total, Higher education .....	1,951,053	1,845,103	2,028,302	+ 77,249	+ 183,199
HOWARD UNIVERSITY					
Academic Program .....	204,404	204,405	204,405	+ 1	
Endowment Program .....	3,526	3,526	3,526		+ 3,526
Howard University Hospital .....	29,461	29,461	29,461		
Total, Howard University .....	237,391	233,866	237,392	+ 1	+ 3,526
COLLEGE HOUSING AND ACADEMIC FACILITIES LOANS (CHAFL) .....	571	481	481	- 90	

	209	188	188	- 21	
HBCU CAPITAL FINANCING PROGRAM—Federal Adm .....					
INSTITUTE OF EDUCATION SCIENCES					
Research, development and dissemination .....					
Statistics .....	162,552	162,535	182,552	+ 20,000	+ 20,017
Regional Educational Laboratories .....	90,022	119,022	95,022	+ 5,000	- 24,000
Research in special education .....	65,470	65,464	68,000	+ 2,530	+ 2,536
Special education studies and evaluations .....	71,840	71,829	71,840		+ 11
Statewide data systems .....	9,900	9,628	9,628	- 272	
Assessment:	24,552	49,152	58,000	+ 33,448	+ 8,848
National Assessment .....	88,095	110,595	98,747	+ 10,652	- 11,848
National Assessment Governing Board .....	5,054	6,037	6,037	+ 983	
Subtotal, Assessment .....	93,149	116,632	104,784	+ 11,635	- 11,848
Total, IES .....	517,485	594,262	589,826	+ 72,341	- 4,436
DEPARTMENTAL MANAGEMENT					
PROGRAM ADMINISTRATION:					
Salaries and Expenses .....	416,487	429,631	429,631	+ 13,144	
Building Modernization .....	2,100	17,303	3,000	+ 900	- 14,303
Total, Program administration .....	418,587	446,934	432,631	+ 14,044	- 14,303
OFFICE FOR CIVIL RIGHTS .....	91,205	93,771	93,771	+ 2,566	
OFFICE OF THE INSPECTOR GENERAL .....	50,266	53,239	54,239	+ 3,973	+ 1,000
Total, Departmental management .....	560,058	593,944	580,641	+ 20,583	- 13,303
Total, Title III, Department of Education .....	60,309,860	59,098,720	62,982,299	+ 2,672,439	+ 3,883,579
Current Year .....	(45,276,359)	(44,065,219)	(45,964,798)	( + 688,439)	( + 1,899,579)
Emergency appropriations .....					
Fiscal Year 2009 .....	(15,033,501)	(15,033,501)	(17,017,501)	( + 1,984,000)	( + 1,984,000)
TITLE IV—RELATED AGENCIES					
COMMITTEE FOR PURCHASE FROM PEOPLE WHO ARE BLIND OR SEVERELY DISABLED .....	4,652	4,994	4,994	+ 342	
CORPORATION FOR NATIONAL AND COMMUNITY SERVICE					
DOMESTIC VOLUNTEER SERVICE PROGRAMS					
Volunteers in Service to America (VISTA) .....	95,468	89,734	95,468		+ 5,734

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 2007 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL  
FOR FISCAL YEAR 2008—Continued  
(In thousands of dollars)

Item	2007 comparable	Budget estimate	Committee recommendation	Senate Committee recommendation compared with (+ or -)	
				2007 comparable	Budget estimate
VISTA cost-share revolving fund .....	3,500	.....	.....	- 3,500	.....
National Senior Volunteer Corps:					
Foster Grandparents Program .....	110,937	97,550	110,937	.....	+ 13,387
Senior Companion Program .....	46,964	41,299	46,964	.....	+ 5,665
Retired Senior Volunteer Program .....	59,685	65,643	59,685	.....	- 5,958
Subtotal, Senior Volunteers .....	217,586	204,492	217,586	.....	+ 13,094
Total, Domestic Volunteer Service Programs .....	316,554	294,226	313,054	- 3,500	+ 18,828
National and Community Service Programs:					
National service trust .....	117,720	122,521	117,720	.....	- 4,801
AmeriCorps grants .....	264,825	255,625	275,775	+ 10,950	+ 20,150
Innovation, assistance, and other activities .....	31,131	12,697	10,550	- 20,581	- 2,147
Evaluation .....	3,960	3,960	3,960	.....	.....
National Civilian Community Corps .....	26,789	11,620	31,789	+ 5,000	+ 20,169
Learn and Serve America: K-12 and Higher Ed .....	37,125	32,099	39,125	+ 2,000	+ 7,026
State Commission Administrative Grants .....	12,516	12,000	12,516	.....	+ 516
Points of Light Foundation .....	.....	8,900	.....	.....	- 8,900
Subtotal, National and Community Service Programs .....	494,066	459,422	491,435	- 2,631	+ 32,013
National and Community Service, Salaries and expenses <sup>14</sup> .....	68,964	69,520	69,520	+ 556	.....
Office of Inspector General .....	4,963	5,512	6,900	+ 1,937	+ 1,388
Total, Corp. for National and Community Service .....	884,547	828,680	880,909	- 3,638	+ 52,229
CORPORATION FOR PUBLIC BROADCASTING:					
Fiscal year 2010 (current) with fiscal year 2009 comparable .....	400,000	.....	420,000	+ 20,000	+ 420,000
Fiscal year 2009 advance with fiscal year 2008 comparable (NA) .....	(400,000)	(400,000)	(400,000)	.....	.....
Subtotal, fiscal year 2009 program level .....	400,000	400,000	400,000	.....	.....

	(400,000)	(400,000) (-50,000)	(400,000)	(+50,000)
Fiscal year 2008 advance with fiscal year 2007 comparable (NA)				
Rescission of fiscal year 2008 funds (NA)				
Subtotal, fiscal year 2008 program level	400,000	350,000	400,000	+50,000
Digitalization program, current funded <sup>15</sup>	29,700		29,700	+29,700
Previous appropriated funds (NA) <sup>16</sup>		(30,600)		(-30,600)
Interconnection, current funded <sup>15</sup>	34,650		26,750	+26,750
Previous appropriated funds (NA) <sup>16</sup>		(26,750)		(-26,750)
Subtotal, fiscal year 2008 appropriation	64,350		56,450	+56,450
FEDERAL MEDIATION AND CONCILIATION SERVICE	42,849	43,800	44,450	+1,601
FEDERAL MINE SAFETY AND HEALTH REVIEW COMMISSION	7,778	8,096		+318
INSTITUTE OF MUSEUM AND LIBRARY SERVICES	247,205	271,246	266,680	+19,475
MEDICARE PAYMENT ADVISORY COMMISSION	12,066	10,748	10,748	-1,318
NATIONAL COMMISSION ON LIBRARIES AND INFO SCIENCE	989		400	+589
NATIONAL COUNCIL ON DISABILITY	3,426	3,113		-313
NATIONAL LABOR RELATIONS BOARD	251,507	256,988	256,988	+5,481
NATIONAL MEDIATION BOARD	11,596	12,242	12,992	+1,396
OCCUPATIONAL SAFETY AND HEALTH REVIEW COMMISSION	10,471	10,696	10,696	+225
RAILROAD RETIREMENT BOARD				
Dual Benefits Payments Account	88,000	79,000	79,000	-9,000
Less Income Tax Receipts on Dual Benefits	-6,000	-6,000	-6,000	
Subtotal, Dual Benefits	82,000	73,000	73,000	-9,000
Federal Payment to the RR Retirement Account	150	150	150	
Limitation on Administration	103,694	103,518	103,694	+176
Inspector General	7,173	7,606	8,000	+394
Payments to Social Security Trust Funds	20,470	28,140	28,140	+7,670
SOCIAL SECURITY ADMINISTRATION				
SUPPLEMENTAL SECURITY INCOME				
Federal benefit payments	37,204,000	40,675,000	40,675,000	+3,471,000
Beneficiary services		36,000	36,000	+36,000
Research and demonstration	27,000	27,000	28,000	+1,000
Administration	2,950,169	2,983,000	3,030,000	+79,831
Subtotal, SSI program level	40,181,169	43,721,000	43,769,000	+3,587,831
				+48,000

COMPARATIVE STATEMENT OF NEW BUDGET (OBLIGATIONAL) AUTHORITY FOR FISCAL YEAR 2007 AND BUDGET ESTIMATES AND AMOUNTS RECOMMENDED IN THE BILL  
 FOR FISCAL YEAR 2008—Continued  
 [In thousands of dollars]

Item	2007 comparable	Budget estimate	Committee recommendation	Senate Committee recommendation compared with (+ or -)	
				2007 comparable	Budget estimate
Less funds advanced in prior year .....	- 1,110,000	- 16,810,000	- 16,810,000	- 5,700,000	.....
Subtotal, regular SSI current year .....	29,071,169	26,911,000	26,959,000	- 2,112,169	+ 48,000
Total, SSI, current request .....	29,071,169	26,911,000	26,959,000	- 2,112,169	+ 48,000
New advance, 1st quarter, fiscal year 2009 .....	16,810,000	14,800,000	14,800,000	- 2,010,000	.....
Total, SSI program .....	45,881,169	41,711,000	41,759,000	- 4,122,169	+ 48,000
LIMITATION ON ADMINISTRATIVE EXPENSES					
OASDI Trust Funds .....	4,598,834	4,698,292	4,776,292	+ 177,458	+ 78,000
HI/SMI Trust Funds .....	1,626,570	1,679,661	1,679,661	+ 53,091	.....
Social Security Advisory Board .....	2,000	2,000	2,000	.....	.....
SSI .....	2,950,169	2,868,000	2,915,000	- 35,169	+ 47,000
Subtotal, regular LAE .....	9,177,573	9,247,953	9,372,953	+ 195,380	+ 125,000
Additional Program Integrity Funding:					
OASDI Trust Funds .....	.....	98,000	98,000	+ 98,000	.....
SSI .....	.....	115,000	115,000	+ 115,000	.....
Subtotal, Additional Program Integrity Funding .....	.....	213,000	213,000	+ 213,000	.....
User Fees:					
SSI User Fee activities .....	117,000	135,000	135,000	+ 18,000	.....
SSPA User Fee Activities .....	1,000	1,000	1,000	.....	.....
Subtotal, User fees .....	118,000	136,000	136,000	+ 18,000	.....
Total, Limitation on Administrative Expenses .....	9,295,573	9,596,953	9,721,953	+ 426,380	+ 125,000

OFFICE OF INSPECTOR GENERAL

Federal Funds .....	25,902	27,000	28,000	+ 2,098	+ 1,000
Trust Funds .....	66,149	68,047	68,047	+ 1,898	.....
Total, Office of Inspector General .....	92,051	95,047	96,047	+ 3,996	+ 1,000
Adjustment: Trust fund transfers from general revenues .....	- 2,950,169	- 2,983,000	- 3,030,000	- 79,831	- 47,000
Total, Social Security Administration .....	52,339,094	48,448,140	48,575,140	- 3,763,954	+ 127,000
Federal funds .....	46,045,541	41,902,140	41,951,140	- 4,094,401	+ 49,000
Current year .....	(29,235,541)	(27,102,140)	(27,151,140)	(- 2,084,401)	( + 49,000)
New advances, 1st quarter .....	(16,810,000)	(14,800,000)	(14,800,000)	(- 2,010,000)	.....
Trust funds .....	6,293,553	6,546,000	6,624,000	+ 330,447	+ 78,000
Total, Title IV, Related Agencies .....	54,473,547	50,082,267	50,736,500	- 3,737,047	+ 654,233
Federal Funds .....	48,057,061	43,414,395	43,990,058	- 4,067,003	+ 575,663
Current Year .....	(30,847,061)	(28,614,395)	(28,770,058)	(- 2,077,003)	( + 155,663)
Fiscal Year 2009 Advance .....	(16,810,000)	(14,800,000)	(14,800,000)	(- 2,010,000)	.....
Fiscal Year 2010 Advance .....	(400,000)	.....	(420,000)	(+ 20,000)	( + 420,000)
Trust Funds .....	6,416,486	6,667,872	6,746,442	+ 329,956	+ 78,570

1 Funding from the Dislocated Worker National Reserve.  
2 Administration for Job Corps funding was transferred from ETA to DM in fiscal year 2006 Act.  
3 Job Corps transferred in fiscal year 2006 Act from ETA to Depart. Management but requested in ETA for fiscal year 2008.  
4 These funds were included in the Maternal and Child Health Block Grant in fiscal year 2007 and the fiscal year 2008 request.  
5 In fiscal year 2006, the Delta Health initiative funded through the Rural hospital flexibility grant program.  
6 Public Law 110-28 transferred \$49.5 million from NHAID and OD to PHSEF in fiscal year 2007.  
7 Includes Mine Safety and Health.  
8 The Deficit Reduction Act of 2005 provided \$74,000,000 for CMS Program Management.  
9 Fiscal Year 2006 Appropriations Act included a \$60,000,000 program administrative reduction.  
10 The Deficit Reduction Act of 2005 provided \$20,000,000 for the Promoting Safe and Stable Entitlement Program.  
11 An additional \$50 million for Health IT within AHRQ.  
12 Funding for Striving readers is forward funded in the fiscal year 2006 conference agreement only.  
13 Fiscal Year 2008 Request under Higher Education.  
14 Current funded.  
15 Requested funds for these activities are from previously appropriated funds.  
16 Funds are transferred from funds appropriated to FEMA.